

**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

09

01

2008

through

09

30

2008

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

09

21

2009

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 the memo entry on Schedule E in the amount of \$1,494.13 represents the inadvertent payment of a portion of an independent expenditure with nonfederal funds. The party will make a corrective transfer to its nonfederal account. This entry and the regular entry showing a payment to the U.S. Post Office correspond to the entry on the 24-hour notice filed on 9/4/08. The independent expenditure was disseminated on 9/3/08 and payment for the independent expenditure was made on 9/4/08. Further, please be advised that the payment to P2B Strategies disclosed on Schedule E represents a payment for an independent expenditure on behalf of Brian Davis for the 2008 Primary which was disseminated on two different dates. \$4,541.63 of the disbursement was a payment for the portion which was disseminated on 9/3/08 and disclosed on a 24-hour notice filed on 9/4/08. The remaining \$4,541.63 was for the portion that was disseminated on 9/8/08 and did not require a notice. The date listed on Schedule E is the date that the party paid for these communications. Please be advised that Schedule D discloses a debt owed to FLS Connect for \$10,270.35 for an independent expenditure that was disseminated on two days. This independent expenditure is reflected on Schedule E as two memo entries- one disclosed on 9/6/08 for \$3,739.50 and the other on 9/8/08 for \$6,530.85. A 24 hour notice for the independent expenditure totaling \$3,739.50 was filed on 9/8/08 with an incorrect date. This independent expenditure was, in fact, disseminated on 9/6/08, not 9/7/08. No 24 hour notice was required for the independent expenditure disseminated on 9/8/08. Please be advised that Schedule E also includes a \$0 entry to FLS Connect. Due to software limitations, this entry needed to be included so that we could properly report memos on Schedule E to connect to the debt disclosed on Schedule D. RNC transfers were not used to pay for exempt activity on Line 21(b).

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

3 / 255

Write or Type Committee Name  
Republican Party of Minnesota

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

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	2008	345095.01
(b) Cash on Hand at Beginning of Reporting Period .....	2331636.75	
(c) Total Receipts (from Line 19) .....	1401169.94	6836209.37
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	3732806.69	7181304.38
7. Total Disbursements (from Line 31) .....	810974.84	4259472.53
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	2921831.85	2921831.85
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	243981.93	

☐ 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)

4 / 255

Write or Type Committee Name

Republican Party of Minnesota

Report Covering the Period:

From:

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

To:

M M  
0 9D D  
3 0Y 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) .....	85122.00	487743.00
(ii) Unitemized .....	452813.88	2619357.35
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	537935.88	3107100.35
(b) Political Party Committees .....	250.00	250.00
(c) Other Political Committees (such as PACs) .....	0.00	11000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	538185.88	3118350.35
12. Transfers From Affiliated/Other Party Committees .....	708035.56	3042997.44
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) .....	26996.10	97582.79
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	4057.06	25478.64
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	123895.34	311699.01
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	123895.34	311699.01
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1401169.94	6836209.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1277274.60	6524510.36

## DETAILED SUMMARY PAGE

of Disbursements

5 / 255

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.....	40539.56	285552.78
(ii) Non-Federal Share.....	72070.32	507649.46
(b) Other Federal Operating Expenditures.....	134121.70	846895.98
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	246731.58	1640098.22
22. Transfers to Affiliated/Other Party Committees.....	130787.31	536584.94
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	3850.00
24. Independent Expenditure (use Schedule E) .....	12083.26	16577.39
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	3251.68	267400.24
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	195.00	7850.00
(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)) .....	195.00	7850.00
29. Other Disbursements.....	0.00	37557.33
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 .....	417926.01	1749554.41
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	417926.01	1749554.41
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	810974.84	4259472.53
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	738904.52	3751823.07

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

6 / 255

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) .....	538185.88	3118350.35
34. Total Contribution Refunds (from Line 28(d)) .....	195.00	7850.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	537990.88	3110500.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	174661.26	1132448.76
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	26996.10	97582.79
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	147665.16	1034865.97

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

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

FOR LINE NUMBER: PAGE 7 / 255

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)

James Aanerud

Mailing Address PO Box 157

City

Donnelly

State

MN

Zip Code

56235-0157

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C689026

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Richard Abbe

Mailing Address 7 Kensington Rd

City

Scarsdale

State

NY

Zip Code

10583-2258

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 ▼

2700.00

Date of Receipt

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

Transaction ID: 90921.C685861

Amount of Each Receipt this Period

2700.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Ken Abramowitz

Mailing Address 411 Harbor Rd

City

Southport

State

CT

Zip Code

06890-1376

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 ▼

10000.00

Date of Receipt

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

Transaction ID: 90921.C685328

Amount of Each Receipt this Period

10000.00

Receipt

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

12800.00

**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 / 255

(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)

Joseph Ahern

Mailing Address 4921 Babcock Trl

Care of Evergreen Ind.

City

Inver Grove Height

State

MN

Zip Code

55077-1288

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  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 90921.C686985

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Caroline Amplatz

Mailing Address 90 S 7th St Ste 5300

City

Minneapolis

State

MN

Zip Code

55402-4120

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

stay at home mom

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

Transaction ID: 90921.C681619

Amount of Each Receipt this Period

400.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

C.I Anderson

Mailing Address 5300 Kelsey Ter

City

Minneapolis

State

MN

Zip Code

55436-1021

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 ▼

1000.00

Date of Receipt

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

Transaction ID: 90921.C682028

Amount of Each Receipt this Period

1000.00

Receipt

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

1600.00

**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 / 255

(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)

Delfin Beltran

Mailing Address 20 2nd St NE unit 2501

City

Minneapolis

State

MN

Zip Code

55413

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 6 / 2 0 0 8

Transaction ID: 90921.C806620

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Richard Bercik

Mailing Address PO Box 8717

City

Incline Village

State

NV

Zip Code

89452-8717

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 ▼

215.00

Date of Receipt

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

Transaction ID: 90921.C685605

Amount of Each Receipt this Period

65.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Darrell Boyd

Mailing Address 6816 Cheyenne Cir

City

Edina

State

MN

Zip Code

55439-1110

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 6 / 2 0 0 8

Transaction ID: 90921.C687679

Amount of Each Receipt this Period

250.00

Receipt

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

415.00

**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 10 / 255

(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)

Linda Brock

Mailing Address 915 Lawnview Ave

City

Shoreview

State

MN

Zip Code

55126-9133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Unisys

Occupation

CMPTR PROGRAMR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 90921.C686874

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Paul Bruce

Mailing Address 8788 Blackoaks Ln N

City

Osseo

State

MN

Zip Code

55311-1471

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Waterside Enterprises

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1775.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 90921.C687130

Amount of Each Receipt this Period

1000.00

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 ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 6 / 2 0 0 8

Transaction ID: 90921.C684637

Amount of Each Receipt this Period

100.00

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)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 255

(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 Buhl

Mailing Address 114 Greene St

City

New York

State

NY

Zip Code

10012-3829

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ACEPH

Occupation

Social Worker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: 90921.C685862

Amount of Each Receipt this Period

4000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Warren Chapman

Mailing Address 1012 12th Ave Apt 309

City

Clarkfield

State

MN

Zip Code

56223-1025

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C689006

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Don Christensen

Mailing Address 14601 Atrium Way Apt 315

City

Minnetonka

State

MN

Zip Code

55345-4765

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 90921.C687364

Amount of Each Receipt this Period

200.00

Receipt

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

4250.00

**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 12 / 255

(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 Clifford

Mailing Address 5800 Saint Croix Ave N Apt C415

City

Minneapolis

State

MN

Zip Code

55422-4774

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 ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 90921.C687291

Amount of Each Receipt this Period

50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Douglas Coleman

Mailing Address 140 S Brown Rd

City

Long Lake

State

MN

Zip Code

55356-9134

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dain Rauscher And Wessels

Occupation

BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 3 / 2 0 0 8

Transaction ID: 90921.C686423

Amount of Each Receipt this Period

500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Thomas Crawmer

Mailing Address 501 NW Lake Ave

City

Elysian

State

MN

Zip Code

56028-2027

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  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 90921.C780554

Amount of Each Receipt this Period

150.00

Receipt

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

700.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 255

(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 Dahling

Mailing Address 60 Hawthorne Rd

City

Grosse Pointe Shor

State

MI

Zip Code

48236-1411

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

..

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 90921.C686804

Amount of Each Receipt this Period

220.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Mary Lou Dasburg

Mailing Address 2650 Marshland Rd

City

Wayzata

State

MN

Zip Code

55391-2648

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 ▼

10100.00

Date of Receipt

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

Transaction ID: 90921.C802663

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Thomas Deters

Mailing Address 4429 Pheasant Run

City

Janesville

State

WI

Zip Code

53546-1019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
information requested

Occupation

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  
0 9 / 2 2 / 2 0 0 8

Transaction ID: 90921.C686204

Amount of Each Receipt this Period

300.00

Receipt

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

620.00

**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 / 255

(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)

Chad Dickey

Mailing Address 1451 5th St NE

City

Wadena

State

MN

Zip Code

56482-2343

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EDD/ITT Corp.

Occupation

Land Mobile Radio Technician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	8

Transaction ID: 90921.C689084

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Dennis Doyle

Mailing Address 9924 Dell Rd

City

Eden Prairie

State

MN

Zip Code

55347-3523

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Welsh Companies

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: 90921.C723532

Amount of Each Receipt this Period

2000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

David Eide

Mailing Address 2213 Ferris Ln

City

Roseville

State

MN

Zip Code

55113-3877

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
0	9		2	4		2	0	0	8

Transaction ID: 90921.C686863

Amount of Each Receipt this Period

120.00

Receipt

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

2220.00

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 / 255

(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)

Curtis Erickson

Mailing Address 3744 Cleveland Ave N Apt 226

City

Saint Paul

State

MN

Zip Code

55112-3266

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

SALES REP INS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 6 / 2 0 0 8

Transaction ID: 90921.C687890

Amount of Each Receipt this Period

2.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Hugh Fairbairn

Mailing Address 6305 Burnham Cir Apt 122

City

Inver Grove Height

State

MN

Zip Code

55076-1665

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  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 90921.C686989

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Thomas Fee

Mailing Address 341 Mill St

City

Saint Paul

State

MN

Zip Code

55102-4413

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  
0 9 / 0 9 / 2 0 0 8

Transaction ID: 90921.C682467

Amount of Each Receipt this Period

300.00

Receipt

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

452.00

**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 / 255

(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 Flesh

Mailing Address 12600 Marion Ln W Apt 307

City

Minnetonka

State

MN

Zip Code

55305-1336

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 ▼

500.00

Date of Receipt

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

Transaction ID: 90921.C801879

Amount of Each Receipt this Period

500.00

Receipt

**B.**

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 ▼

2000.00

Date of Receipt

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

Transaction ID: 90921.C683231

Amount of Each Receipt this Period

1000.00

Receipt

**C.**

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 ▼

215.00

Date of Receipt

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

Transaction ID: 90921.C682151

Amount of Each Receipt this Period

55.00

Receipt

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

1555.00

**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 / 255

(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)

Mark Gruss

Mailing Address 4400 VALLEY BLVD N

City

Shakopee

State

MN

Zip Code

55379

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fremont Industries

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 7 / 2 0 0 8

Transaction ID: 90921.C684991

Amount of Each Receipt this Period

3000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

James Hall

Mailing Address 2236 17th St NW

City

New Brighton

State

MN

Zip Code

55112-5458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AAI Corp

Occupation

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C688903

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

George Hartman

Mailing Address PO Box 207

City

Dalton

State

MN

Zip Code

56324-0207

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  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 90921.C686975

Amount of Each Receipt this Period

100.00

Receipt

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

3150.00

**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 / 255

(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)

Bruce Heikes

Mailing Address 19740 Kenrick Ave

City

Lakeville

State

MN

Zip Code

55044-7636

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Heikes Farms, Inc.

Occupation

SELF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 90921.C806424

Amount of Each Receipt this Period

1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Eric Hemingway

Mailing Address 5201 Eden Ave Ste 200

City

Minneapolis

State

MN

Zip Code

55436-2360

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwestern Mutual Finan-  
cial

Occupation

Financial Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 90921.C682438

Amount of Each Receipt this Period

1000.00

Receipt

**C.**

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  
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  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C688991

Amount of Each Receipt this Period

250.00

Receipt

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

2250.00

**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 / 255

(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)

Scott Honour

Mailing Address 1466 Bienvenida Ave

City

Pacific Palisades

State

CA

Zip Code

90272-2346

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Gores Group

Occupation  
Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

Transaction ID: 90921.C681621

Amount of Each Receipt this Period

5000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

William Horn

Mailing Address 4511 Browndale Ave

City

Edina

State

MN

Zip Code

55424-1142

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
F W Olin Foundation

Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 90921.C686899

Amount of Each Receipt this Period

200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Mark Jirik

Mailing Address 2728 Georgia Ave S

City

Minneapolis

State

MN

Zip Code

55426-3339

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cargill

Occupation  
Commodity Trader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 6 / 2 0 0 8

Transaction ID: 90921.C684819

Amount of Each Receipt this Period

250.00

Receipt

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

5450.00

**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 20 / 255

(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)

Daniel Johnson

Mailing Address 596 164th St S

City

Glyndon

State

MN

Zip Code

56547-9568

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 90921.C686761

Amount of Each Receipt this Period

500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Donald Johnson

Mailing Address 1365 Holly Ave N

City

Saint Paul

State

MN

Zip Code

55128-6028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation  
DENTIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C689066

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Evan Johnson

Mailing Address 1405 Colorado Ave S

City

Minneapolis

State

MN

Zip Code

55416-1409

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 90921.C686992

Amount of Each Receipt this Period

225.00

Receipt

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

825.00

**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 / 255

(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)

Marvin Johnson

Mailing Address 1414 Ridge Cliff Ln NE

City

Rochester

State

MN

Zip Code

55906-8705

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 ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	8

Transaction ID: 90921.C687677

Amount of Each Receipt this Period

50.00

Receipt

**B.**

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 RequestedOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	0	8

Transaction ID: 90921.C687030

Amount of Each Receipt this Period

25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Robert Kierlin

Mailing Address PO Box 978  
1770 Ralph Scharmer Dr

City

Winona

State

MN

Zip Code

55987-0978

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FasteralOccupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: 90921.C683751

Amount of Each Receipt this Period

3000.00

Receipt

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

3075.00

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 / 255

(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)

Loyd Kile

Mailing Address 7508 Imperial Dr N

City

Brooklyn Park

State

MN

Zip Code

55443-3218

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 6 / 2 0 0 8

Transaction ID: 90921.C687614

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Wallace King

Mailing Address 25620 Birch Bluff Rd

City

Excelsior

State

MN

Zip Code

55331-8305

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  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 90921.C687276

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

James Klaustermeier

Mailing Address PO Box 186

City

Lester Prairie

State

MN

Zip Code

55354-0186

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Medallion Cabinetry

Occupation  
Cabinet Maker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: 90921.C685867

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 255

(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)

Harold Knudson

Mailing Address 16503 220th St

City

Mc Grath

State

MN

Zip Code

56350-4048

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  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 90921.C688532

Amount of Each Receipt this Period

50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

William Korn

Mailing Address 13369 Teaberry Ct

City

Fairfax

State

VA

Zip Code

22033-1109

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 ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 6 / 2 0 0 8

Transaction ID: 90921.C687871

Amount of Each Receipt this Period

55.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Ralph Kriesel

Mailing Address 6141 Arctic Way

City

Edina

State

MN

Zip Code

55436-1844

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Larson Olds

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 5 / 2 0 0 8

Transaction ID: 90921.C684482

Amount of Each Receipt this Period

100.00

Receipt

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

205.00

**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 / 255

(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)

Theresa Kruse

Mailing Address 216 Terrace Dr

City

Mankato

State

MN

Zip Code

56001-5352

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mankato State University

Occupation

Support Staff

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 3 / 2 0 0 8

Transaction ID: 90921.C686281

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Earl Lillestrand

Mailing Address 6100 Auto Club Rd Apt 214

City

Bloomington

State

MN

Zip Code

55438-2488

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 90921.C687356

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

E Lindberg

Mailing Address 8965 Alfa Ln

City

Inver Grove Height

State

MN

Zip Code

55077-3710

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lovering Assoc

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 90921.C686870

Amount of Each Receipt this Period

100.00

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 25 / 255

(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)

Harold Loveman

Mailing Address 7 Pleasant Hill Dr

City

Rolling Hills Esta

State

CA

Zip Code

90274-1521

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 ▼

1700.00

Date of Receipt

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

Transaction ID: 90921.C688302

Amount of Each Receipt this Period

1700.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Thomas Lowe

Mailing Address 3295 Carman Rd

City

Excelsior

State

MN

Zip Code

55331-9501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: 90921.C778451

Amount of Each Receipt this Period

5000.00

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 ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 3 / 2 0 0 8

Transaction ID: 90921.C686046

Amount of Each Receipt this Period

2500.00

Receipt

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

9200.00

**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 / 255

(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)

Helen Mahoney

Mailing Address 1067 Quixote Ave N

City

Lakeland

State

MN

Zip Code

55043-9617

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 6 / 2 0 0 8

Transaction ID: 90921.C687674

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Mary Malevich

Mailing Address 9812 Cupola Ln

City

Eden Prairie

State

MN

Zip Code

55347-3623

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 ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 90921.C687109

Amount of Each Receipt this Period

200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Brian Mark

Mailing Address 4780 Lodge Ln

City

Greenwood

State

MN

Zip Code

55331-9287

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rbc Tile And Stone

Occupation  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

Transaction ID: 90921.C681620

Amount of Each Receipt this Period

6000.00

Receipt

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

6400.00

**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 / 255

(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A.**

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  
RetiredOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	8

Transaction ID: 90921.C804802

Amount of Each Receipt this Period

30.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Mary Lou Mathiowetz

Mailing Address 30817 County Road 24

City

Sleepy Eye

State

MN

Zip Code

56085-4361

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	8

Transaction ID: 90921.C687359

Amount of Each Receipt this Period

105.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Donald Maus

Mailing Address 16486 County 4

City

Osakis

State

MN

Zip Code

56360-4689

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
FARMER FT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C688510

Amount of Each Receipt this Period

150.00

Receipt

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

285.00

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 / 255

(check only one)

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

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NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)

Alvin Mcquinn

Mailing Address 5225 Blake Rd S

City

Edina

State

MN

Zip Code

55436-1127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ag-chem Equipment Co, Inc

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	8

Transaction ID: 90921.C684270

Amount of Each Receipt this Period

500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Carol Mindlin

Mailing Address 4626 Noble Ave

City

Sherman Oaks

State

CA

Zip Code

91403

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
0	9	/	1	0	/	2	0	0	8

Transaction ID: 90921.C682682

Amount of Each Receipt this Period

2300.00

Receipt

**C.**

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 ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	3	/	2	0	0	8

Transaction ID: 90921.C686453

Amount of Each Receipt this Period

75.00

Receipt

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

2875.00

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 / 255

(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)

Brooks Myhran

Mailing Address 5237 Morgan Ave S

City

Minneapolis

State

MN

Zip Code

55419-1026

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  
0 9 / 1 0 / 2 0 0 8

Transaction ID: 90921.C682905

Amount of Each Receipt this Period

250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Wallace Nelson

Mailing Address 13496 60th St S

City

Afton

State

MN

Zip Code

55001-9633

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  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C688910

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Conrad Ohm

Mailing Address 1239 Riverside Dr

City

Detroit Lakes

State

MN

Zip Code

56501-2715

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Becker County

Occupation

ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

165.00

Date of Receipt

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

Transaction ID: 90921.C682172

Amount of Each Receipt this Period

65.00

Receipt

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

365.00

**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 / 255

(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)

Conrad Ohm

Mailing Address 1239 Riverside Dr

City

Detroit Lakes

State

MN

Zip Code

56501-2715

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Becker County

Occupation

ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 6 / 2 0 0 8

Transaction ID: 90921.C687876

Amount of Each Receipt this Period

155.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Greta Olsoe

Mailing Address 988 Stony Point Rd

City

Eagan

State

MN

Zip Code

55123-1567

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 3 / 2 0 0 8

Transaction ID: 90921.C686497

Amount of Each Receipt this Period

125.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Robert Pence

Mailing Address 28231 112th St NW

City

Zimmerman

State

MN

Zip Code

55398-5400

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Mosnic Company

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 90921.C686603

Amount of Each Receipt this Period

200.00

Receipt

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

480.00

**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 / 255

(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)

Raymond Pinson

Mailing Address 1 Lillehei Plz

City

Saint Paul

State

MN

Zip Code

55117-1761

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 ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C799950

Amount of Each Receipt this Period

10000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

T 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  
Retired

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: 90921.C686207

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

T 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  
Retired

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

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

Transaction ID: 90921.C688749

Amount of Each Receipt this Period

150.00

Receipt

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

10300.00

**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 / 255

(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 Rhude

Mailing Address 2200 E 41st St

City

Hibbing

State

MN

Zip Code

55746-3289

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rhude And Fryberger

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 7 / 2 0 0 8

Transaction ID: 90921.C684992

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

T Rigler

Mailing Address 104 Twin Oaks Dr

City

Los Gatos

State

CA

Zip Code

95032-5650

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 ▼

265.00

Date of Receipt

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

Transaction ID: 90921.C688414

Amount of Each Receipt this Period

75.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

John Rupp

Mailing Address 6261 Fernbrook Ln N

City

Maple Grove

State

MN

Zip Code

55311-4233

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 90921.C687454

Amount of Each Receipt this Period

100.00

Receipt

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

275.00

**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 / 255

(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 Ryman

Mailing Address 6600 Lyndale Ave S Apt 1501

City

Minneapolis

State

MN

Zip Code

55423-3397

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  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 90921.C687154

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Walter Sanders

Mailing Address PO Box 465

City

Jewett

State

TX

Zip Code

75846-0465

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 ▼

300.00

Date of Receipt

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

Transaction ID: 90921.C683235

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Walter Sanders

Mailing Address PO Box 465

City

Jewett

State

TX

Zip Code

75846-0465

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 ▼

400.00

Date of Receipt

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

Transaction ID: 90921.C685504

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 34 / 255

(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)

Corrine Sands

Mailing Address 3858 Hayvenhurst Dr

City

Encino

State

CA

Zip Code

91436-3600

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 ▼

1000.00

Date of Receipt

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

Transaction ID: 90921.C682437

Amount of Each Receipt this Period

1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Lenny Sands

Mailing Address 3858 Hayvenhurst Dr

City

Encino

State

CA

Zip Code

91436-3600

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alchemy Worldwide

Occupation

Chairman & 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  
0 9 / 0 9 / 2 0 0 8

Transaction ID: 90921.C682436

Amount of Each Receipt this Period

1000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Martin Sathre

Mailing Address 1423 Irvine Ave NW

City

Bemidji

State

MN

Zip Code

56601-2766

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 ▼

400.00

Date of Receipt

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

Transaction ID: 90921.C686233

Amount of Each Receipt this Period

100.00

Receipt

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

2100.00

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

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

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

FOR LINE NUMBER: PAGE 35 / 255

(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)

Paul Savaryn

Mailing Address 9950 N Shore Rd

City

Waconia

State

MN

Zip Code

55387-9503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ridgeview Hospital

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 5 / 2 0 0 8

Transaction ID: 90921.C683932

Amount of Each Receipt this Period

250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Thomas Schabel

Mailing Address 1393 W Latoka Dr SW

City

Alexandria

State

MN

Zip Code

56308-9396

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Extrusion Co

Occupation

VICE 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  
0 9 / 0 2 / 2 0 0 8

Transaction ID: 90921.C680752

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Ralph Schoeller

Mailing Address 5750 148th St N Apt 6

City

Hugo

State

MN

Zip Code

55038-9288

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  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 90921.C688451

Amount of Each Receipt this Period

250.00

Receipt

**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 36 / 255

(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)

Brian Slipka

Mailing Address 6182 Oak Hollow Ln

City

Circle Pines

State

MN

Zip Code

55014-3345

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  
0 9 / 1 5 / 2 0 0 8

Transaction ID: 90921.C683936

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Mark Stage

Mailing Address 1246 Willow Ln

City

Roseville

State

MN

Zip Code

55113-3236

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Warner Stellan

Occupation

S REP MFG/WHLS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 3 / 2 0 0 8

Transaction ID: 90921.C686493

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Daniel Starks

Mailing Address 31 Quintessa Cir

City

Las Vegas

State

NV

Zip Code

89141-6054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Us Postal Service

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C681346

Amount of Each Receipt this Period

5000.00

Receipt

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

5250.00

**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 37 / 255

(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)

Wallace Starwalt

Mailing Address 10 Windsor Ct Apt 201

City

New Brighton

State

MN

Zip Code

55112-3382

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  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 90921.C686834

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Richard Steffenhagen

Mailing Address 28365 Flower Valley Trl

City

Red Wing

State

MN

Zip Code

55066-5642

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 ▼

200.00

Date of Receipt

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

Transaction ID: 90921.C685623

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Richard Steffenhagen

Mailing Address 28365 Flower Valley Trl

City

Red Wing

State

MN

Zip Code

55066-5642

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  
0 9 / 2 6 / 2 0 0 8

Transaction ID: 90921.C687667

Amount of Each Receipt this Period

200.00

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 38 / 255

(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)

Daniel Stock

Mailing Address 612 3rd Ave NE

City

Sartell

State

MN

Zip Code

56377-1145

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
International Paper

Occupation  
LABORER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 90921.C765123

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Daniel Stock

Mailing Address 612 3rd Ave NE

City

Sartell

State

MN

Zip Code

56377-1145

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
International Paper

Occupation  
LABORER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 90921.C686828

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Richard Strand

Mailing Address 1800 Orchard Springs Rd

City

Bloomington

State

MN

Zip Code

55425-2554

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  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 90921.C687008

Amount of Each Receipt this Period

100.00

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 255

(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)

Kenneth Surprenant

Mailing Address 224 Stonehenge Dr

City

Mankato

State

MN

Zip Code

56001-9337

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
I & S Engineers7 Arch.

Occupation

ENGINEER (NRR)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 90921.C687260

Amount of Each Receipt this Period

115.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Richard Theilmann

Mailing Address 2430 Winter Cir

City

Wayzata

State

MN

Zip Code

55391-2420

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UBS Financial

Occupation

Investment Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 3 / 2 0 0 8

Transaction ID: 90921.C762676

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Richard Tieva

Mailing Address 6130 Wynnwood Rd

City

Golden Valley

State

MN

Zip Code

55422-3344

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northland Mechanical Contr-  
racti

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 90921.C686887

Amount of Each Receipt this Period

100.00

Receipt

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

315.00

**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 40 / 255

(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)

Jerome Trapp

Mailing Address 4649 170th Ave

City

Mahnomen

State

MN

Zip Code

56557

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  
0 9 / 0 8 / 2 0 0 8

Transaction ID: 90921.C682173

Amount of Each Receipt this Period

110.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Donald Vaneyll

Mailing Address 1218 Vincent Pl

City

Chaska

State

MN

Zip Code

55318-2430

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  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 90921.C686880

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Phillip Wear

Mailing Address 5405 Opportunity Ct

City

Hopkins

State

MN

Zip Code

55343-9025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Popco, Inc.

Occupation  
SALES CTR PER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 3 / 2 0 0 8

Transaction ID: 90921.C802201

Amount of Each Receipt this Period

50.00

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 255

(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 Weiner

Mailing Address 6662 Smithtown Rd

City

Excelsior

State

MN

Zip Code

55331-8209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Consultant (Self)

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  
0 9 / 1 6 / 2 0 0 8

Transaction ID: 90921.C684917

Amount of Each Receipt this Period

500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Patrick Weldon

Mailing Address 8709 Hastings Ct NE

City

Minneapolis

State

MN

Zip Code

55449-4510

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Honeywell International

Occupation  
Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 7 / 2 0 0 8

Transaction ID: 90921.C685160

Amount of Each Receipt this Period

2300.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Gary Yee

Mailing Address 5081 Minneapolis Ave

City

Mound

State

MN

Zip Code

55364-9768

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  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 90921.C687262

Amount of Each Receipt this Period

100.00

Receipt

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

2900.00

**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 42 / 255

(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)

Timothy Yocum

Mailing Address 1694 Ivory Ave N

City

Lake Elmo

State

MN

Zip Code

55042-9309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Yocum Oil Company

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: 90921.C681850

Amount of Each Receipt this Period

350.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Doyle Young

Mailing Address 2405 Annapolis Ln N

City

Minneapolis

State

MN

Zip Code

55441-3636

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  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 90921.C688646

Amount of Each Receipt this Period

500.00

Receipt

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

850.00

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

85122.00

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

FOR LINE NUMBER: PAGE 43 / 255

(check only one)

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

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)

Independent Republican Committee

Mailing Address 103 E Central Ave

City

Edgerton

State

MN

Zip Code

56128-2715

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 90921.C688826

Amount of Each Receipt this Period

250.00

Receipt

NOTE: Fed permissible fu-  
nds

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

250.00

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

250.00

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

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

FOR LINE NUMBER: PAGE 44 / 255

(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)

Republican National Committee - Rnc

Mailing Address 310 1st St SE

City

Washington

State

DC

Zip Code

20003-1885

FEC ID number of contributing  
federal political committee.

**C**

C00003418

Name of Employer  
information requested

Occupation

..

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

26000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 90921.C725477

Amount of Each Receipt this Period

26000.00

Transfers From Affil./Aut-  
h.

**B.**

Full Name (Last, First, Middle Initial)

Republican National Committee - Rnc

Mailing Address 310 1st St SE

City

Washington

State

DC

Zip Code

20003-1885

FEC ID number of contributing  
federal political committee.

**C**

C00003418

Name of Employer  
information requested

Occupation

..

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

188000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C725482

Amount of Each Receipt this Period

162000.00

Transfers From Affil./Aut-  
h.

**C.**

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

FEC ID number of contributing  
federal political committee.

**C**

C00436428

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372649.74

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C691520

Amount of Each Receipt this Period

88944.58

Transfers From Affil./Aut-  
h.

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

276944.58

**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 45 / 255

(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)

Beverly Oren

Mailing Address 3105 Sandy Hook Dr

City

Roseville

State

MN

Zip Code

55113-2128

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693269

Amount of Each Receipt this Period

5000.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

**B.**

Full Name (Last, First, Middle Initial)

Whitney MacMillan

Mailing Address 1560 Fox St.

City

Wayzata

State

MN

Zip Code

55391-9328

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 ▼

7300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693254

Amount of Each Receipt this Period

5000.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

**C.**

Full Name (Last, First, Middle Initial)

Elizabeth Macmillan

Mailing Address 1560 Fox St

City

Wayzata

State

MN

Zip Code

55391-9328

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 ▼

7300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C802712

Amount of Each Receipt this Period

5000.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

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

0.00

**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 46 / 255

(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)

Qian Redmond

Mailing Address 7321 Washington Ave S

City

Edina

State

MN

Zip Code

55439-2407

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693282

Amount of Each Receipt this Period

5000.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

**B.**

Full Name (Last, First, Middle Initial)

Janet Anderson

Mailing Address 2250 LAKE OF ISLES PKWY W

City

Minneapolis

State

MN

Zip Code

55405-

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 ▼

9800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693304

Amount of Each Receipt this Period

9800.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

**C.**

Full Name (Last, First, Middle Initial)

Ward Brehm

Mailing Address 430 Brown Rd S

City

Wayzata

State

MN

Zip Code

55391-9314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brehm Group

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693273

Amount of Each Receipt this Period

1000.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

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

0.00

**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 47 / 255

(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)

Bahram Akradi

Mailing Address 4345 Trillium Ln W

City

Minnetrista

State

MN

Zip Code

55364-7713

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Life Time Fitness

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693302

Amount of Each Receipt this Period

10000.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

**B.**

Full Name (Last, First, Middle Initial)

Robert Pohlad

Mailing Address 4801 Bywood St W

City

Minneapolis

State

MN

Zip Code

55436-1306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PepsiAmericas, Inc

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693301

Amount of Each Receipt this Period

10000.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

**C.**

Full Name (Last, First, Middle Initial)

Bradbury Anderson

Mailing Address 2250 W Lake Of The Isles Pkwy

City

Minneapolis

State

MN

Zip Code

55405-2426

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Best Buy

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693303

Amount of Each Receipt this Period

10000.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

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

0.00

**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 48 / 255

(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 Schulze

Mailing Address 8500 Normandale Lake Blvd

City

Minneapolis

State

MN

Zip Code

55437-3813

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Best Buy

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C776051

Amount of Each Receipt this Period

2300.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

**B.**

Full Name (Last, First, Middle Initial)

Targetcitizens Political Forum

Mailing Address 1000 Nicollet Mall

City

Minneapolis

State

MN

Zip Code

55403-2542

FEC ID number of contributing  
federal political committee.

**C**

C00098061

Name of Employer  
information requested

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  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693267

Amount of Each Receipt this Period

5000.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

**C.**

Full Name (Last, First, Middle Initial)

Aicpa Pac

Mailing Address 220 Leigh Farm Rd

City

Durham

State

NC

Zip Code

27707-8110

FEC ID number of contributing  
federal political committee.

**C**

C00077321

Name of Employer  
information requested

Occupation  
..

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693278

Amount of Each Receipt this Period

2500.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

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

0.00

**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 49 / 255

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

Samuel Zell

Mailing Address 2 N Riverside Plz

City

Chicago

State

IL

Zip Code

60606-2600

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Equity Group InvestmentOccupation  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693264

Amount of Each Receipt this Period

10000.00

Transfer Memo

**[MEMO ITEM]**Memo- MN Coleman Victory  
08**B.**

Full Name (Last, First, Middle Initial)

Nancy Lindahl

Mailing Address 3222 Robinson Bay Rd

City

Wayzata

State

MN

Zip Code

55391-2615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SupervaluOccupation  
Vp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693297

Amount of Each Receipt this Period

500.00

Transfer Memo

**[MEMO ITEM]**Memo- MN Coleman Victory  
08**C.**

Full Name (Last, First, Middle Initial)

Dave Boehnen

Mailing Address 71 Otis Ln

City

Saint Paul

State

MN

Zip Code

55104-5645

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dave Supervaly IncOccupation  
Executive Vp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693296

Amount of Each Receipt this Period

2500.00

Transfer Memo

**[MEMO ITEM]**Memo- MN Coleman Victory  
08

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

0.00

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 50 / 255

(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)

Jay Franke

Mailing Address 65 E Goethe St

City

Chicago

State

IL

Zip Code

60610-2628

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  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693266

Amount of Each Receipt this Period

5000.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

**B.**

Full Name (Last, First, Middle Initial)

Floyd Schlossberg

Mailing Address 4200 W Peterson Ave

City

Chicago

State

IL

Zip Code

60646-6074

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693298

Amount of Each Receipt this Period

700.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

**C.**

Full Name (Last, First, Middle Initial)

3m Company Political Action Committee

Mailing Address 3M Center

City

Saint Paul

State

MN

Zip Code

55144-1001

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  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693272

Amount of Each Receipt this Period

5000.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

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

0.00

**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 51 / 255

(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)

Sun Healthcare Pac

Mailing Address 101 Sun Ave NE

City

Albuquerque

State

NM

Zip Code

87109-4373

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693300

Amount of Each Receipt this Period

1000.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

**B.**

Full Name (Last, First, Middle Initial)

Sig Rogich

Mailing Address 3883 Howard Hughes Pkwy

City

Las Vegas

State

NV

Zip Code

89169-0928

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 ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693275

Amount of Each Receipt this Period

5000.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

**C.**

Full Name (Last, First, Middle Initial)

Valupac/supervalu Inc

Mailing Address 11840 Valley View Rd

City

Eden Prairie

State

MN

Zip Code

55344-3643

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  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693280

Amount of Each Receipt this Period

5000.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

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

0.00

**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 52 / 255

(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 Redmond

Mailing Address 200 REFUGIO RD

City

Santa Ynez

State

CA

Zip Code

93460-

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  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693281

Amount of Each Receipt this Period

5000.00

Transfer Memo

**[MEMO ITEM]**

Memo- MN Coleman Victory  
08

**B.**

Full Name (Last, First, Middle Initial)

Mccain Victory

Mailing Address 228 S Washington St  
Ste 115

City

Alexandria

State

VA

Zip Code

22314-5408

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 ▼

2049131.95

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C681345

Amount of Each Receipt this Period

174402.54

Transfers From Affil./Aut-  
h.

**C.**

Full Name (Last, First, Middle Initial)

Lynne Walton

Mailing Address 308 NE C St

City

Bentonville

State

AR

Zip Code

72712-5331

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694290

Amount of Each Receipt this Period

300.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

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

174402.54

**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 53 / 255

(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 Kaufman

Mailing Address 450 Fashion Ave PH  
Penthouse

City State Zip Code  
New York NY 10123-4699

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Kaufman Management

Occupation  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694251

Amount of Each Receipt this Period

4225.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Thomas S. Everist

Mailing Address 709 E Tomar Rd

City State Zip Code  
Sioux Falls SD 57105-7053

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
The Everist Company

Occupation  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5950.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694205

Amount of Each Receipt this Period

5950.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Lauri Union

Mailing Address 30 Hayden Rd

City State Zip Code  
Brookline MA 02445-5730

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Union Corrugating

Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694287

Amount of Each Receipt this Period

4225.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

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

0.00

**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 54 / 255

(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 Shannon

Mailing Address 1510 E 10th Ave Apt 15  
15th Floor

City State Zip Code  
Denver CO 80218-3109

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
K.S.L. Capital Partners

Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694274

Amount of Each Receipt this Period

4225.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Roger Stone

Mailing Address 1114 Sheridan Rd

City State Zip Code  
Glencoe IL 60022-1248

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Kapstone Paper

Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694279

Amount of Each Receipt this Period

4800.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Jay Precourt

Mailing Address 328 Mill Creek Cir

City State Zip Code  
Vail CO 81657-5168

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Wyoming Refinancing Compa-  
ny

Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694269

Amount of Each Receipt this Period

1050.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

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

0.00

**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 / 255

(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 Rubright

Mailing Address 2963 Habersham Rd NW

City

Atlanta

State

GA

Zip Code

30305-2847

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rock-Tenn Company

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694271

Amount of Each Receipt this Period

1150.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Robert Thompson

Mailing Address PO Box 6349

City

Plymouth

State

MI

Zip Code

48170-0353

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Thompson Foundation

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C733879

Amount of Each Receipt this Period

325.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

J.c. Walter

Mailing Address 1100 Louisiana St Ste 320  
Suite 320

City

Houston

State

TX

Zip Code

77002-5231

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Walter Oil & Gas

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694289

Amount of Each Receipt this Period

2500.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

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

0.00

**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 / 255

(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)

Margaret M. Bloomfield

Mailing Address 1262 Corsica Dr

City

Pacific Palisades

State

CA

Zip Code

90272-4016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Baron Real Estate

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694203

Amount of Each Receipt this Period

6750.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Richard Parillo

Mailing Address 150 W Eugenie St

City

Chicago

State

IL

Zip Code

60614-5839

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Auto Insurance Gro-  
up

Occupation  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694268

Amount of Each Receipt this Period

5000.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

M. Reyes

Mailing Address 210 Melrose Ave

City

Kenilworth

State

IL

Zip Code

60043-1251

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Reyes Holding LLC

Occupation  
Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694270

Amount of Each Receipt this Period

1475.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

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

0.00

**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 / 255

(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)

Hushang Ansary

Mailing Address 1000 LOUISIAR 59TH FLOOR  
Suite 5900

City State Zip Code  
Houston TX 77002-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Stewart and Stevenson

Occupation  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694190

Amount of Each Receipt this Period

2500.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Maria Zoullas-kaufman

Mailing Address 888 Park Ave

City State Zip Code  
New York NY 10075-0282

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self employed

Occupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694294

Amount of Each Receipt this Period

4225.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Peter O Donnell

Mailing Address 100 Crescent Ct Ste 1690

City State Zip Code  
Dallas TX 75201-6900

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self-employed

Occupation  
Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C805266

Amount of Each Receipt this Period

7125.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

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

0.00

**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 / 255

(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)

Peter O Donnell

Mailing Address 100 Crescent Ct Ste 1690

City

Dallas

State

TX

Zip Code

75201-6900

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation

Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C805265

Amount of Each Receipt this Period

375.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Mickey Shapiro

Mailing Address 5030 Winlane Dr

City

Bloomfield Hills

State

MI

Zip Code

48302-2866

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation

Real Estate Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694276

Amount of Each Receipt this Period

7300.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Glade Knight

Mailing Address 814 E Main St

City

Richmond

State

VA

Zip Code

23219-3306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Apple Reit Companies

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694255

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

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

0.00

**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 / 255

(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)

Anthony Gioia

Mailing Address 55 Meadow Rd

City

Buffalo

State

NY

Zip Code

14216-3613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.s. State Department

Occupation

U.s. Ambassador To Malta

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694215

Amount of Each Receipt this Period

7125.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Anthony Soave

Mailing Address 3400 E Lafayette St

City

Detroit

State

MI

Zip Code

48207-4962

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Soave Enterprises LLC

Occupation

Chairman & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694278

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Angelique Soave

Mailing Address 4841 S California Ave # 3505  
# 3505

City

Chicago

State

IL

Zip Code

60632-2017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Soave Enterprises

Occupation

Senior Financial Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694277

Amount of Each Receipt this Period

925.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

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

0.00

**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 / 255

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)

Peter Forster

Mailing Address 5291 Partridge Ln NW

City

Washington

State

DC

Zip Code

20016-5338

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 ▼

1250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	8

Transaction ID: 90921.C694207

Amount of Each Receipt this Period

1250.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Al Hilde

Mailing Address 2530 Xenium Ln N

City

Minneapolis

State

MN

Zip Code

55441-3627

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 ▼

9175.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	8

Transaction ID: 90921.C694238

Amount of Each Receipt this Period

6675.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

David Giltitz

Mailing Address 845 Red Mountain Dr

City

Glenwood Springs

State

CO

Zip Code

81601-3290

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 ▼

9249.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	8

Transaction ID: 90921.C694233

Amount of Each Receipt this Period

8762.50

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

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

0.00

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 61 / 255

(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)

Joanne Hunter

Mailing Address 801 Pacific Ave

City

Manhattan Beach

State

CA

Zip Code

90266-5849

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 ▼

112.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694244

Amount of Each Receipt this Period

112.50

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Jahangir Nazemian

Mailing Address 700 Park Ave Apt 9B  
Apt. 9B

City

New York

State

NY

Zip Code

10021-7098

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 ▼

5675.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694264

Amount of Each Receipt this Period

5675.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

David Giltitz

Mailing Address 845 Red Mountain Dr

City

Glenwood Springs

State

CO

Zip Code

81601-3290

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 ▼

9249.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694229

Amount of Each Receipt this Period

487.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

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

0.00

**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 62 / 255

(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)

Charles Fote

Mailing Address 3 Bridle Path Ln

City

Englewood

State

CO

Zip Code

80113-6058

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 ▼

9250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694208

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Robert McCormack

Mailing Address 780 Barberry Ln

City

Lake Forest

State

IL

Zip Code

60045-1402

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 ▼

9250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694263

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Norman Freidkin

Mailing Address 11819 Piney Glen Ln

City

Potomac

State

MD

Zip Code

20854-1414

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 ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694212

Amount of Each Receipt this Period

475.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

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

0.00

**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 63 / 255

(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)

Phillip Ruffin

Mailing Address 2689 Red Arrow Dr

City

Las Vegas

State

NV

Zip Code

89135-1607

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self employed

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7975.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694272

Amount of Each Receipt this Period

7975.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Susan Stone

Mailing Address 1114 Sheridan Rd

City

Glencoe

State

IL

Zip Code

60022-1248

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694280

Amount of Each Receipt this Period

4225.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Shahla Ansary

Mailing Address 1000 Louisiana St Fl 59  
59th Floor

City

Houston

State

TX

Zip Code

77002-5005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8175.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694193

Amount of Each Receipt this Period

1925.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

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

0.00

**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 64 / 255

(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 Shannon

Mailing Address 1510 E 10th Ave Apt 15  
15th Floor

City State Zip Code  
Denver CO 80218-3109

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Homemaker

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694273

Amount of Each Receipt this Period

4225.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)  
Karen Shapiro

Mailing Address 5030 Winlane Dr

City State Zip Code  
Bloomfield Hills MI 48302-2866

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Homemaker

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694275

Amount of Each Receipt this Period

4800.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)  
Jayne Hilde

Mailing Address 2530 Xenium Ln N

City State Zip Code  
Minneapolis MN 55441-3627

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Satellite Industries

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694240

Amount of Each Receipt this Period

6375.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

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

0.00

**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 65 / 255

(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)  
 Edith Odonnell

Mailing Address 100 Crescent Ct Ste 1690  
 Suite 1690

City State Zip Code  
 Dallas TX 75201-1837

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 ▼  
 10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694265

Amount of Each Receipt this Period

10000.00

Transfer Memo

**[MEMO ITEM]**  
 Memo-McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)  
 Patricia Lynch

Mailing Address PO Box 2176

City State Zip Code  
 Edwards CO 81632-2176

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 Homemaker

Occupation  
 Information Requested

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

Aggregate Year-to-Date ▼  
 475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694261

Amount of Each Receipt this Period

475.00

Transfer Memo

**[MEMO ITEM]**  
 Memo-McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)  
 Shahla Ansary

Mailing Address 1000 Louisiana St Fl 59  
 59th Floor

City State Zip Code  
 Houston TX 77002-5005

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer  
 Homemaker

Occupation  
 Information Requested

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

Aggregate Year-to-Date ▼  
 8175.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694196

Amount of Each Receipt this Period

6250.00

Transfer Memo

**[MEMO ITEM]**  
 Memo-McCain Victory 08

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

0.00

**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 / 255

(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)

Jayne Jones

Mailing Address 275 Syndicate St N Apt 711

City

Saint Paul

State

MN

Zip Code

55104-5436

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 ▼

5375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694245

Amount of Each Receipt this Period

5375.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Candace Straight

Mailing Address 518 E Passaic Ave

City

Bloomfield

State

NJ

Zip Code

07003-5315

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 ▼

175.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694281

Amount of Each Receipt this Period

175.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Pamela Barer

Mailing Address 6020 Shane Dr

City

Edina

State

MN

Zip Code

55439-1758

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 ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694199

Amount of Each Receipt this Period

525.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

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

0.00

**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 / 255

(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 Fitzgerald

Mailing Address 723 10th Ave SW

City

Rochester

State

MN

Zip Code

55902-2029

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 ▼

2125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694206

Amount of Each Receipt this Period

2125.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

David Harbour

Mailing Address 21090 N Pima Rd

City

Scottsdale

State

AZ

Zip Code

85255-6617

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 ▼

9250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 4 / 2 0 0 8

Transaction ID: 90921.C694234

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**

Memo-McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Mccain Victory

Mailing Address 228 S Washington St  
Ste 115

City

Alexandria

State

VA

Zip Code

22314-5408

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 ▼

2305820.39

Date of Receipt

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

Transaction ID: 90921.C687715

Amount of Each Receipt this Period

256688.44

Transfers From Affil./Aut-  
h.

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

256688.44

**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 / 255

(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 Greenbaum

Mailing Address 5612 N Yucca Rd

City

Paradise Valley

State

AZ

Zip Code

85253-5244

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 ▼

1875.00

Date of Receipt

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

Transaction ID: 90921.C693485

Amount of Each Receipt this Period

1875.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Paul Baker

Mailing Address 3333 E Speedway Blvd

City

Tucson

State

AZ

Zip Code

85716-3935

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 ▼

13000.00

Date of Receipt

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

Transaction ID: 90921.C693467

Amount of Each Receipt this Period

3000.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory-refu-  
nding

**C.**

Full Name (Last, First, Middle Initial)

Ralph Hooper

Mailing Address 489 Devon Park Dr

City

Wayne

State

PA

Zip Code

19087-1809

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 ▼

3362.50

Date of Receipt

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

Transaction ID: 90921.C693502

Amount of Each Receipt this Period

3362.50

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

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

0.00

**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 / 255

(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)

Jaen-marie Eveillard

Mailing Address 3 E 84th St

City

New York

State

NY

Zip Code

10028-0407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9250.00

Date of Receipt

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

Transaction ID: 90921.C693480

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

David Epstein

Mailing Address 260 Franklin St Fl 11

City

Boston

State

MA

Zip Code

02110-3112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

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

Transaction ID: 90921.C693478

Amount of Each Receipt this Period

4800.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

James McErlane

Mailing Address PO Box 565

City

West Chester

State

PA

Zip Code

19381-0565

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lamb McErlane

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5375.00

Date of Receipt

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

Transaction ID: 90921.C693524

Amount of Each Receipt this Period

5375.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

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

0.00

**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 / 255

(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)

Ann Reed

Mailing Address PO Box 7270

City

Rancho Santa Fe

State

CA

Zip Code

92067-7270

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 ▼

3025.00

Date of Receipt

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

Transaction ID: 90921.C693585

Amount of Each Receipt this Period

3025.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Margaret Caveney

Mailing Address 17301 Ridgeland Ave

City

Tinley Park

State

IL

Zip Code

60477-3093

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 ▼

5850.00

Date of Receipt

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

Transaction ID: 90921.C693470

Amount of Each Receipt this Period

5850.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Laura McLaughline

Mailing Address 116 Ayer Rd

City

Harvard

State

MA

Zip Code

01451-1410

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 ▼

6750.00

Date of Receipt

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

Transaction ID: 90921.C693529

Amount of Each Receipt this Period

6750.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

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

0.00

**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 / 255

(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)

Elaine Hooper

Mailing Address 489 Devon Park Dr

City

Wayne

State

PA

Zip Code

19087-1809

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 ▼

2787.50

Date of Receipt

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

Transaction ID: 90921.C693501

Amount of Each Receipt this Period

2787.50

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Barbara White

Mailing Address 1000 E 80th Pl

City

Merrillville

State

IN

Zip Code

46410-5608

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 ▼

9250.00

Date of Receipt

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

Transaction ID: 90921.C693592

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Joseph Lopez

Mailing Address 458 Mariner Dr

City

Jupiter

State

FL

Zip Code

33477-4068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
L3-Ilex

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4225.00

Date of Receipt

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

Transaction ID: 90921.C693521

Amount of Each Receipt this Period

4225.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

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

0.00

**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 / 255

(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)

Marcia Gilliam

Mailing Address 16104 Colleton Ct

City

Bristol

State

VA

Zip Code

24202-4861

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
C.S.E. Financial Services

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9250.00

Date of Receipt

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

Transaction ID: 90921.C693482

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Marvin Gilliam

Mailing Address 16104 Colleton Ct

City

Bristol

State

VA

Zip Code

24202-4861

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cumberland Resources Corp-  
orati

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9250.00

Date of Receipt

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

Transaction ID: 90921.C693484

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**C.**

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 ▼

9250.00

Date of Receipt

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

Transaction ID: 90921.C693593

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

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

0.00

**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 73 / 255

(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 Dejoy

Mailing Address 7900 Triad Center Dr Ste 400

City

Greensboro

State

NC

Zip Code

27409-9076

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New Breed Logistics

Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

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

Transaction ID: 90921.C693477

Amount of Each Receipt this Period

1350.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Sean McLaughlin

Mailing Address 116 Ayer Rd

City

Harvard

State

MA

Zip Code

01451-1410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hurdle Rate Capital

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6750.00

Date of Receipt

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

Transaction ID: 90921.C693531

Amount of Each Receipt this Period

6750.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

George Osborne

Mailing Address PO Box 97010

City

Kirkland

State

WA

Zip Code

98083-9710

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Osborne Construction

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7900.00

Date of Receipt

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

Transaction ID: 90921.C693581

Amount of Each Receipt this Period

7325.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

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

0.00

**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 74 / 255

(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)

Charles Ryan

Mailing Address ROMANOV PERECLOH, APT 5, BUILDING

City State Zip Code  
 Russia IL 99999-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Deutsche Bank

Occupation  
BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9250.00

Date of Receipt

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

Transaction ID: 90921.C693586

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Dan Kirby

Mailing Address PO Box 5102

City State Zip Code  
 Sioux Falls SD 57117-5102

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Kirby Financial LLC

Occupation  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5375.00

Date of Receipt

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

Transaction ID: 90921.C693514

Amount of Each Receipt this Period

5375.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Lawrence Neubauer

Mailing Address 115 Central Park W

City State Zip Code  
 New York NY 10023-4198

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
S.G. Cowen

Occupation  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

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

Transaction ID: 90921.C693579

Amount of Each Receipt this Period

4800.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

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

0.00

**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 75 / 255

(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)

Aflac Inc. Pac

Mailing Address 1932 Wynnton Rd

City

Columbus

State

GA

Zip Code

31999-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
information requested

Occupation

..

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID: 90921.C693466

Amount of Each Receipt this Period

1250.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

William Ulm

Mailing Address 1240 Ramser Dr

City

Bogart

State

GA

Zip Code

30622-2472

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
information requested

Occupation

..

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4225.00

Date of Receipt

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

Transaction ID: 90921.C693589

Amount of Each Receipt this Period

4225.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Peter Herschend

Mailing Address 538 Oak Bluff Rd

City

Branson

State

MO

Zip Code

65616-9110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Herschend Family Entertain-  
ment

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

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

Transaction ID: 90921.C693494

Amount of Each Receipt this Period

375.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

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

0.00

**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 76 / 255

(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)

Peter Herschend

Mailing Address 538 Oak Bluff Rd

City

Branson

State

MO

Zip Code

65616-9110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Herschend Family Entertain-  
ment

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

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

Transaction ID: 90921.C693495

Amount of Each Receipt this Period

575.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Ronald Wanek

Mailing Address 555 5th Ave NE Ste 814

City

Saint Petersburg

State

FL

Zip Code

33701-2671

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ashley Furniture

Occupation  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5475.00

Date of Receipt

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

Transaction ID: 90921.C693591

Amount of Each Receipt this Period

5475.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Stanford M. Adelstein

Mailing Address P.o. Box 2624

City

Rapid City

State

SD

Zip Code

57709-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northwest Engineering

Occupation  
C. E. O.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4225.00

Date of Receipt

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

Transaction ID: 90921.C693311

Amount of Each Receipt this Period

4225.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

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

0.00

**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 77 / 255

(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 H. Barnhill

Mailing Address 10801 Stevenson Rd

City

Stevenson

State

MD

Zip Code

21153-0679

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brown Advisory

Occupation

Banker/partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2875.00

Date of Receipt

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

Transaction ID: 90921.C693468

Amount of Each Receipt this Period

2875.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Bati Prince

Mailing Address 3149 Hutton Dr

City

Beverly Hills

State

CA

Zip Code

90210-1107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Real Estate Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: 90921.C693583

Amount of Each Receipt this Period

2500.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Brian Prince

Mailing Address 3149 Hutton Dr

City

Beverly Hills

State

CA

Zip Code

90210-1107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Real Estate Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: 90921.C693584

Amount of Each Receipt this Period

2500.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

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

0.00

**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 78 / 255

(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)

Jack Caveney

Mailing Address 17301 Ridgeland Ave

City

Tinley Park

State

IL

Zip Code

60477-3093

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Panduit Corporation

Occupation

Chairman Of The Board

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4950.00

Date of Receipt

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

Transaction ID: 90921.C693469

Amount of Each Receipt this Period

4950.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Louis Dejoy

Mailing Address 806 Country Club Dr

City

Greensboro

State

NC

Zip Code

27408-5601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New Breed

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3962.50

Date of Receipt

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

Transaction ID: 90921.C693475

Amount of Each Receipt this Period

1350.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

William Fralin

Mailing Address 2744 Jefferson St SE

City

Roanoke

State

VA

Zip Code

24014-3318

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Medical Facilities of Ame-  
rica

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4475.00

Date of Receipt

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

Transaction ID: 90921.C693481

Amount of Each Receipt this Period

4475.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

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

0.00

**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 79 / 255

(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)

Louis Dejoy

Mailing Address 806 Country Club Dr

City

Greensboro

State

NC

Zip Code

27408-5601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New Breed

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3962.50

Date of Receipt

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

Transaction ID: 90921.C693474

Amount of Each Receipt this Period

112.50

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Louis Dejoy

Mailing Address 806 Country Club Dr

City

Greensboro

State

NC

Zip Code

27408-5601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New Breed

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3962.50

Date of Receipt

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

Transaction ID: 90921.C693476

Amount of Each Receipt this Period

2500.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

David Herro

Mailing Address 65 E Goethe St  
Apt 3N

City

Chicago

State

IL

Zip Code

60610-2628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Harris Assoc

Occupation

Investment Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13550.00

Date of Receipt

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

Transaction ID: 90921.C693486

Amount of Each Receipt this Period

6250.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory-refu-  
nding

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

0.00

**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 80 / 255

(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)

Lance Shaner

Mailing Address 1965 Waddle Rd

City

State

Zip Code

State College

PA

16803-1639

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Shaner Companies

Occupation

Chairman & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7300.00

Date of Receipt

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

Transaction ID: 90921.C693587

Amount of Each Receipt this Period

7300.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Paul Ormond

Mailing Address 2420 Underhill Rd

City

State

Zip Code

Ottawa Hills

OH

43615-2332

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
H.C.R. Manor Care, Inc

Occupation

Chairman, President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4225.00

Date of Receipt

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

Transaction ID: 90921.C693580

Amount of Each Receipt this Period

4225.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Dudley Hughes

Mailing Address 2829 Lakeland Dr Ste 1670

City

State

Zip Code

Flowood

MS

39232-9535

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Geologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6604.00

Date of Receipt

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

Transaction ID: 90921.C693506

Amount of Each Receipt this Period

6604.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

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

0.00

**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 81 / 255

(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)

Jamie Coulter

Mailing Address 302 N Rock Rd Ste 210

City

Wichita

State

KS

Zip Code

67206-2255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coulter Enterprises, Inc

Occupation

Chairman & Chief Executive Off

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9250.00

Date of Receipt

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

Transaction ID: 90921.C693471

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Kimberly Coulter

Mailing Address 302 N Rock Rd Ste 210

City

Wichita

State

KS

Zip Code

67206-2255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Plaid Giraffe, Inc

Occupation

Buyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9250.00

Date of Receipt

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

Transaction ID: 90921.C693472

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Habib Debs

Mailing Address 7716 Carlton Pl

City

Mc Lean

State

VA

Zip Code

22102-2149

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Advanced Technology

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5475.00

Date of Receipt

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

Transaction ID: 90921.C693473

Amount of Each Receipt this Period

5475.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

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

0.00

**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 82 / 255

(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 Eveillard

Mailing Address 3 E 84th St Apt 7

City

New York

State

NY

Zip Code

10028-0407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired Investment Banker

Occupation

Corporate Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9250.00

Date of Receipt

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

Transaction ID: 90921.C693479

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Robert Hillies

Mailing Address 951 E Wye Ln

City

Milwaukee

State

WI

Zip Code

53217-3649

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Direct Supply Inc

Occupation

President & Cheif Executive Of

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4225.00

Date of Receipt

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

Transaction ID: 90921.C693497

Amount of Each Receipt this Period

4225.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Michael Miller

Mailing Address 6525 Belmont St

City

Houston

State

TX

Zip Code

77005-3803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AIG Highstar Capital LLC

Occupation

Private Equity Invstements

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9250.00

Date of Receipt

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

Transaction ID: 90921.C693576

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

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

0.00

**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 83 / 255

(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)

Jeffrey Moorad

Mailing Address 4016 JEFFERSON ST

City

Phoenix

State

AZ

Zip Code

85004-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Arizona Diamondbacks

Occupation

CEO & Principal Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9250.00

Date of Receipt

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

Transaction ID: 90921.C693578

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

Robert Pierce

Mailing Address 1502 Middlebury Dr

City

Alexandria

State

VA

Zip Code

22307-1722

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pierce Associates, Inc

Occupation

Mechanical Contractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

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

Transaction ID: 90921.C693582

Amount of Each Receipt this Period

1050.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Duer Wagner

Mailing Address 6300 PLACE SUITE 820

City

Fort Worth

State

TX

Zip Code

76116-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Oil & Gas Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1425.00

Date of Receipt

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

Transaction ID: 90921.C693590

Amount of Each Receipt this Period

1325.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

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

0.00

**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 84 / 255

(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)

Jan Moorad

Mailing Address 5709 N Saguaro Rd

City

Paradise Valley

State

AZ

Zip Code

85253-5238

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 ▼

9250.00

Date of Receipt

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

Transaction ID: 90921.C693577

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**B.**

Full Name (Last, First, Middle Initial)

John Middleton

Mailing Address 343 Avon Rd

City

Bryn Mawr

State

PA

Zip Code

19010-3655

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 ▼

375.00

Date of Receipt

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

Transaction ID: 90921.C693575

Amount of Each Receipt this Period

375.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

**C.**

Full Name (Last, First, Middle Initial)

Stacey Studnik

Mailing Address 1101 Harbor Ct

City

Hollywood

State

FL

Zip Code

33019-5031

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 ▼

9250.00

Date of Receipt

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

Transaction ID: 90921.C693588

Amount of Each Receipt this Period

9250.00

Transfer Memo

**[MEMO ITEM]**

Memo- McCain Victory 08

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

0.00

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

708035.56

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

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

FOR LINE NUMBER: PAGE 85 / 255

(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)

Griffin Management

Mailing Address 1161 Wayzata Blvd E Ste 210

City

Wayzata

State

MN

Zip Code

55391-1935

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

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

Transaction ID: 90921.C691925

Amount of Each Receipt this Period

25000.00

Offsets to Operating Expe-  
nditu

Note: refund 4/10/08 paym-  
ent

**B.**

Full Name (Last, First, Middle Initial)

US Post Office

Mailing Address 401 Kellogg Blvd E

City

Saint Paul

State

MN

Zip Code

55101-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
information requested

Occupation

..

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3690.00

Date of Receipt

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

Transaction ID: 90921.C685315

Amount of Each Receipt this Period

774.90

Offsets to Operating Expe-  
nditu

Note: Vendor Refund

**C.**

Full Name (Last, First, Middle Initial)

US Post Office

Mailing Address 401 Kellogg Blvd E

City

Saint Paul

State

MN

Zip Code

55101-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
information requested

Occupation

..

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4219.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 90921.C687409

Amount of Each Receipt this Period

529.20

Offsets to Operating Expe-  
nditu

Note: Vendor Refund

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

26304.10

**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 86 / 255

(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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A.**

Full Name (Last, First, Middle Initial)

Coleman For Senate

Mailing Address 680 Transfer Rd

City

Saint Paul

State

MN

Zip Code

55114-4502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2084.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	8

Transaction ID: 90921.C681348

Amount of Each Receipt this Period

692.00

Offsets to Operating Expe-  
ndituNote: Usual/Normal Office  
Rent

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

692.00

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

26996.10

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

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

FOR LINE NUMBER: PAGE 87 / 255

(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)

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 ▼

11107.27

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693747

Amount of Each Receipt this Period

829.49

Other Receipt

Note: Interest Income

**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 ▼

11137.44

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693594

Amount of Each Receipt this Period

30.17

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 ▼

14334.84

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 90921.C693595

Amount of Each Receipt this Period

3197.40

Other Receipt

NOTE: Interest Income

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

4057.06

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

4057.06

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) Micro Age			Transaction ID: 90921.E19456 Date of Disbursement <div> <div> <div>M</div> <div>M</div> </div> <div>/</div> <div> <div>D</div> <div>D</div> </div> <div>/</div> <div> <div>Y</div> <div>Y</div> <div>Y</div> <div>Y</div> </div> </div> <div> <div>0</div> <div>9</div> </div> <div> <div>1</div> <div>1</div> </div> <div> <div>2</div> <div>0</div> <div>0</div> <div>8</div> </div>	
	Mailing Address PO Box 2941				
	City Phoenix		State AZ	Zip Code 85062-	
	Purpose of Disbursement Office Equipment Lease/Purchase		<div> <div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div> </div>		
Candidate Name		Category/ Type			
Office Sought: <div> <div><input type="checkbox"/></div> House <div><input type="checkbox"/></div> Senate <div><input type="checkbox"/></div> President </div>		Disbursement For: <div> <div><input type="checkbox"/></div> Primary <div><input type="checkbox"/></div> General <div><input type="checkbox"/></div> Other (specify) ▼ </div>			
State: District:		OFFICE EQUIPMENT LEASE/PU- RCHASE			
B.	Full Name (Last, First, Middle Initial) RJF Agencies			Transaction ID: 90921.E19973 Date of Disbursement <div> <div> <div>M</div> <div>M</div> </div> <div>/</div> <div> <div>D</div> <div>D</div> </div> <div>/</div> <div> <div>Y</div> <div>Y</div> <div>Y</div> <div>Y</div> </div> </div> <div> <div>0</div> <div>9</div> </div> <div> <div>0</div> <div>1</div> </div> <div> <div>2</div> <div>0</div> <div>0</div> <div>8</div> </div>	
	Mailing Address 6000 Nathan Ln N Ste 400				
	City Minneapolis		State MN	Zip Code 55442-1691	
	Purpose of Disbursement General Liability Insurance		<div> <div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div> </div>		
Candidate Name		Category/ Type			
Office Sought: <div> <div><input type="checkbox"/></div> House <div><input type="checkbox"/></div> Senate <div><input type="checkbox"/></div> President </div>		Disbursement For: <div> <div><input type="checkbox"/></div> Primary <div><input type="checkbox"/></div> General <div><input type="checkbox"/></div> Other (specify) ▼ </div>			
State: District:		GENERAL LIABILITY INSURAN- CE			
C.	Full Name (Last, First, Middle Initial) Rebecca L. Alery			Transaction ID: 90921.E19744 Date of Disbursement <div> <div> <div>M</div> <div>M</div> </div> <div>/</div> <div> <div>D</div> <div>D</div> </div> <div>/</div> <div> <div>Y</div> <div>Y</div> <div>Y</div> <div>Y</div> </div> </div> <div> <div>0</div> <div>9</div> </div> <div> <div>1</div> <div>8</div> </div> <div> <div>2</div> <div>0</div> <div>0</div> <div>8</div> </div>	
	Mailing Address 16214 Germanium St NW				
	City Anoka		State MN	Zip Code 55303-	
	Purpose of Disbursement Meals		<div> <div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div> </div>		
Candidate Name		Category/ Type			
Office Sought: <div> <div><input type="checkbox"/></div> House <div><input type="checkbox"/></div> Senate <div><input type="checkbox"/></div> President </div>		Disbursement For: <div> <div><input type="checkbox"/></div> Primary <div><input type="checkbox"/></div> General <div><input type="checkbox"/></div> Other (specify) ▼ </div>			
State: District:		MEALS			

FEC Schedule B ( Form 3X) (Revised 02/2003)



# **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 89 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) GR Seppala & Associates	<b>Transaction ID:</b> 90921.E21457 <b>Date of Disbursement</b>
Mailing Address 1161 E Wayzata Blvd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 8</div> </div>
City Wayzata State MN Zip Code 55391- Purpose of Disbursement Gen. Party Fundraising Consulting Candidate Name	Amount of Each Disbursement this Period <div>1500.00</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) ▼	<div> <div>Category/Type</div> <div>GEN. PARTY FUNDRAISING CO-NSULTING</div> </div>
<b>B.</b> Full Name (Last, First, Middle Initial) GR Seppala & Associates	<b>Transaction ID:</b> 90921.E19267 <b>Date of Disbursement</b>
Mailing Address 1161 E Wayzata Blvd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 8 / 2 0 0 8</div> </div>
City Wayzata State MN Zip Code 55391- Purpose of Disbursement Gen. Party Fundraising Consulting Candidate Name	Amount of Each Disbursement this Period <div>5000.00</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) ▼	<div> <div>Category/Type</div> <div>GEN. PARTY FUNDRAISING CO-NSULTING</div> </div>
<b>C.</b> Full Name (Last, First, Middle Initial) Hayley M. Astrup	<b>Transaction ID:</b> 90921.E19751 <b>Date of Disbursement</b>
Mailing Address 602 24th St NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 8 / 2 0 0 8</div> </div>
City Austin State MN Zip Code 55912- Purpose of Disbursement Reimburse for milage Candidate Name	Amount of Each Disbursement this Period <div>263.67</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> <div>Category/Type</div> <div>REIMBURSE FOR MILAGE</div> </div>

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

**6763.67**

**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 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Auto Owners Insurance	<b>Transaction ID:</b> 90921.E19811 <b>Date of Disbursement</b>																				
Mailing Address PO Box 30278	<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>0</td><td>9</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	0	9		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	5		2	0	0	8												
City Lansing State MI Zip Code 48909-7778	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Workers Comp Ins	<table border="1"> <tr> <td colspan="10">793.10</td> </tr> </table>	793.10																			
793.10																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
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) ▼	<b>WORKERS COMP INS</b>																				
State: District:																					
<b>B.</b> Full Name (Last, First, Middle Initial) Evie Axdahl	<b>Transaction ID:</b> 90921.E24424 <b>Date of Disbursement</b>																				
Mailing Address 2209 Payne 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>0</td><td>9</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	0	9		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	5		2	0	0	8												
City Maplewood State MN Zip Code 55117-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement SEE BELOW: Reimburse for lodging	<table border="1"> <tr> <td colspan="10">677.00</td> </tr> </table>	677.00																			
677.00																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
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) ▼	<b>SEE BELOW: REIMBURSE FOR LODGING</b>																				
State: District:																					
<b>C.</b> Full Name (Last, First, Middle Initial) Hyatt Regency	<b>Transaction ID:</b> 90921.E19842 <b>Date of Disbursement</b>																				
Mailing Address 1300 Nicolett Mall	<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>0</td><td>9</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	0	9		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	5		2	0	0	8												
City Minneapolis State MN Zip Code 55403-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement AXDAHL - LODGING	<table border="1"> <tr> <td colspan="10">677.00</td> </tr> </table>	677.00																			
677.00																					
Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
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) ▼	<b>[MEMO ITEM]</b> <b>MEMO: AXDAHL - LODGING</b>																				
State: District:																					

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

**1470.10**

**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

Full Name (Last, First, Middle Initial)  
Alliance Bank

MM / DD / YYYY

1022.87

Category/ Type	Count
Category 1	10
Category 2	20
Category 3	30
Category 4	40
Category 5	50
Category 6	60
Category 7	70
Category 8	80
Category 9	90
Category 10	100
Category 11	110
Category 12	120
Category 13	130
Category 14	140
Category 15	150
Category 16	160
Category 17	170
Category 18	180
Category 19	190
Category 20	200
Category 21	210
Category 22	220
Category 23	230
Category 24	240
Category 25	250
Category 26	260
Category 27	270
Category 28	280
Category 29	290
Category 30	300
Category 31	310
Category 32	320
Category 33	330
Category 34	340
Category 35	350
Category 36	360
Category 37	370
Category 38	380
Category 39	390
Category 40	400
Category 41	410
Category 42	420
Category 43	430
Category 44	440
Category 45	450
Category 46	460
Category 47	470
Category 48	480
Category 49	490
Category 50	500
Category 51	510
Category 52	520
Category 53	530
Category 54	540
Category 55	550
Category 56	560
Category 57	570
Category 58	580
Category 59	590
Category 60	600
Category 61	610
Category 62	620
Category 63	630
Category 64	640
Category 65	650
Category 66	660
Category 67	670
Category 68	680
Category 69	690
Category 70	700
Category 71	710
Category 72	720
Category 73	730
Category 74	740
Category 75	750
Category 76	760
Category 77	770
Category 78	780
Category 79	790
Category 80	800
Category 81	810
Category 82	820
Category 83	830
Category 84	840
Category 85	850
Category 86	860
Category 87	870
Category 88	880
Category 89	890
Category 90	900
Category 91	910
Category 92	920
Category 93	930
Category 94	940
Category 95	950
Category 96	960
Category 97	970
Category 98	980
Category 99	990
Category 100	1000

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

INTEREST ON LOAN PAYMENT

Full Name (Last, First, Middle Initial)  
Alliance Bank

09 / 30 / 2008

78.85

Category/ Type	Count
Category 1	10
Category 2	20
Category 3	30
Category 4	40
Category 5	50
Category 6	60
Category 7	70
Category 8	80
Category 9	90
Category 10	100

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

MONTHLY SERVICE CHARGE

Full Name (Last, First, Middle Initial)  
Darren Bearson

223.04

Category/ Type	Count
Category 1	10
Category 2	20
Category 3	30
Category 4	40
Category 5	50
Category 6	60
Category 7	70
Category 8	80
Category 9	90
Category 10	100

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

REIMBURSE FOR MILAGE

**1324.76**

# **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 92 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Darren Bearson	<b>Transaction ID:</b> 90921.E19753 <b>Date of Disbursement</b>																				
Mailing Address 3930 Yellowstone Ln 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>0</td><td>9</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	0	9		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	8		2	0	0	8												
City Plymouth State MN Zip Code 55446-2818	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>3</td><td>4</td><td>.</td><td>1</td><td>8</td> </tr> </table>	3	4	.	1	8															
3	4	.	1	8																	
Purpose of Disbursement SEE BELOW: Reimburse for meals Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
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>SEE BELOW: REIMBURSE FOR MEALS</b>																				
<b>B.</b> Full Name (Last, First, Middle Initial) Arbys	<b>Transaction ID:</b> 90921.E19755																				
Mailing Address 2130 37th St NW	<b>Date of Disbursement</b> <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>0</td><td>9</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	0	9		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	8		2	0	0	8												
City Rochester State MN Zip Code 55901-0573	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2</td><td>1</td><td>.</td><td>3</td><td>6</td> </tr> </table>	2	1	.	3	6															
2	1	.	3	6																	
Purpose of Disbursement BEARSON - MEAL Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
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>[MEMO ITEM]</b> MEMO: BEARSON - MEAL																				
<b>C.</b> Full Name (Last, First, Middle Initial) Chipotle	<b>Transaction ID:</b> 90921.E19754																				
Mailing Address 867 Grand Ave.	<b>Date of Disbursement</b> <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>0</td><td>9</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	0	9		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	8		2	0	0	8												
City St. Paul State MN Zip Code 55105-	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1</td><td>2</td><td>.</td><td>8</td><td>2</td> </tr> </table>	1	2	.	8	2															
1	2	.	8	2																	
Purpose of Disbursement BEARSON - MEAL Candidate Name	<table border="1"> <tr> <td>Category/ Type</td> </tr> </table>	Category/ Type																			
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>[MEMO ITEM]</b> MEMO: BEARSON - MEAL																				

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

**34.18**

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 93 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Bury Companies Rebar Mailing Address 14210 Northdale Blvd City Rogers State MN Zip Code 55374-9608 Purpose of Disbursement Exempt Yard Signs 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>Transaction ID:</b> 90921.E19781 <b>Date of Disbursement</b> <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>0</td><td>9</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">37778.46</div> EXEMPT YARD SIGNS	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	2		2	0	0	8													
<b>B.</b> Full Name (Last, First, Middle Initial) Staples Business Advantage Mailing Address PO Box 83689 City Chicago State IL Zip Code 60696-0001 Purpose of Disbursement General Office Supplies 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>Transaction ID:</b> 90921.E19968 <b>Date of Disbursement</b> <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>0</td><td>9</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">71.84</div> GENERAL OFFICE SUPPLIES	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	1		2	0	0	8													
<b>C.</b> Full Name (Last, First, Middle Initial) Staples Business Advantage Mailing Address PO Box 83689 City Chicago State IL Zip Code 60696-0001 Purpose of Disbursement General Office Supplies 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>Transaction ID:</b> 90921.E19969 <b>Date of Disbursement</b> <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>0</td><td>9</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">100.47</div> GENERAL OFFICE SUPPLIES	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	1		2	0	0	8													

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

37950.77

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)

PAGE 94 / 255

<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)  
Susan H. Closmore

Mailing Address 1308 7th St SE Apt 13

City Minneapolis State MN Zip Code 55414-1678

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.E19749

Date of Disbursement

/   /

Amount of Each Disbursement this Period

REIMBURSE FOR MILEAGE

**B.**

Full Name (Last, First, Middle Initial)  
Susan H. Closmore

Mailing Address 1308 7th St SE Apt 13

City Minneapolis State MN Zip Code 55414-1678

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.E19847

Date of Disbursement

/   /

Amount of Each Disbursement this Period

REIMBURSE FOR MILEAGE

**C.**

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

Mailing Address 9344 134th Street

City Savage State MN Zip Code 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.E23511

Date of Disbursement

/   /

Amount of Each Disbursement this Period

REIMBURSE FOR MILEAGE

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

**431.57**

**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 95 / 255

<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 meal

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E23526

Date of Disbursement

/   /

Amount of Each Disbursement this Period

180.39

SEE BELOW REIMBURSE FOR MEAL

**B.**

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

Mailing Address 51578 Highway 169

City State Zip Code  
Mankato MN 56001-

Purpose of Disbursement  
ERICKSON - LODGING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19307

Date of Disbursement

/   /

Amount of Each Disbursement this Period

71.37

**[MEMO ITEM]**

MEMO: ERICKSON - LODGING

**C.**

Full Name (Last, First, Middle Initial)  
Godfathers Pizza

Mailing Address 1521 Tullamore St

City State Zip Code  
Mankato MN 56001-4816

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.E19314

Date of Disbursement

/   /

Amount of Each Disbursement this Period

7.27

**[MEMO ITEM]**

MEMO: ERICKSON - MEAL

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

180.39

**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)

PAGE 96 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Starbucks	<b>Transaction ID:</b> 90921.E19311 <b>Date of Disbursement</b>
Mailing Address 1851 E Madison Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div>
City Mankato State MN Zip Code 56001-6200	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement ERICKSON - MEAL Candidate Name	<div> <div>13.47</div> <div>[MEMO ITEM] MEMO: ERICKSON - MEAL</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>B.</b> Full Name (Last, First, Middle Initial) Target Superstore	<b>Transaction ID:</b> 90921.E19309 <b>Date of Disbursement</b>
Mailing Address 1850 Adams St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div>
City Mankato State MN Zip Code 56001-4864	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement ERICKSON - MEAL Candidate Name	<div> <div>5.36</div> <div>[MEMO ITEM] MEMO: ERICKSON - MEAL</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>C.</b> Full Name (Last, First, Middle Initial) Taco Johns	<b>Transaction ID:</b> 90921.E19315 <b>Date of Disbursement</b>
Mailing Address 1601 Lor Ray Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div>
City Mankato State MN Zip Code 56003-2803	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement ERICKSON - MEAL Candidate Name	<div> <div>4.64</div> <div>[MEMO ITEM] MEMO: ERICKSON - MEAL</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)

PAGE 97 / 255

<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)  
Buffalo Wild Wings

Mailing Address 12 Civic Center Plz

City Mankato State MN Zip Code 56001-7781

Purpose of Disbursement  
ERICKSON - MEALS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E19305

Date of Disbursement

/   /

Amount of Each Disbursement this Period

78.28

**[MEMO ITEM]**

MEMO: ERICKSON - MEALS

**B.**

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

Mailing Address 9344 134th Street

City Savage State MN Zip Code 55378-

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.E23523

Date of Disbursement

/   /

Amount of Each Disbursement this Period

157.22

REIMBURSE FOR MILAGE

**C.**

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

Mailing Address P.o. Box 5167

City Westborough State MA Zip Code 01581-

Purpose of Disbursement  
E-Merchant Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E19981

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4.50

E-MERCHANT FEES

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

161.72

**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 98 / 255

<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 Fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19983

Date of Disbursement

/   /

Amount of Each Disbursement this Period

671.99

E-MERCHANT FEES

**B.**

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  
SEE BELOW: Reimburse for lodging

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19844

Date of Disbursement

/   /

Amount of Each Disbursement this Period

73.68

SEE BELOW: REIMBURSE FOR  
LODGING

**C.**

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

Mailing Address 1815 Paul Bunyan Dr NW

City State Zip Code  
Bemidji MN 56601-5602

Purpose of Disbursement  
FLEMING - LODGING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19846

Date of Disbursement

/   /

Amount of Each Disbursement this Period

73.68

**[MEMO ITEM]**  
MEMO: FLEMING - LODGING

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

745.67

**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 99 / 255

<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.E19845

Date of Disbursement

/   /

Amount of Each Disbursement this Period

590.40

REIMBURSE FOR MILAGE

**B.**

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  
SEE BELOW: Reimburse for office sup

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19480

Date of Disbursement

/   /

Amount of Each Disbursement this Period

206.66

SEE BELOW: REIMBURSE FOR  
OFFICE SUP

**C.**

Full Name (Last, First, Middle Initial)  
Sprint

Mailing Address 4501 15th Ave S

City State Zip Code  
Fargo ND 58103-8956

Purpose of Disbursement  
FRANZE - CELL PHONE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19484

Date of Disbursement

/   /

Amount of Each Disbursement this Period

78.37

**[MEMO ITEM]**  
MEMO: FRANZE - CELL PHONE

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

797.06

**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 / 255

<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

<b>A.</b>		Full Name (Last, First, Middle Initial) Wadena Inn and Grill		Transaction ID: 90921.E19300 Date of Disbursement 09 / 11 / 2008	
Mailing Address		500 Ash Ave NW		Amount of Each Disbursement this Period 50.00	
City Wadena		State MN		Zip Code 56482-1140	
Purpose of Disbursement FRANZE - HOTEL RENTAL		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: FRANZE - HOTEL RENTAL	
State: District:					
<b>B.</b>		Full Name (Last, First, Middle Initial) Office Max - Fargo		Transaction ID: 90921.E19302 Date of Disbursement 09 / 11 / 2008	
Mailing Address		4360 13th Ave S		Amount of Each Disbursement this Period 64.65	
City Fargo		State ND		Zip Code 58103-3310	
Purpose of Disbursement FRANZE - PRINTER INK		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: FRANZE - PRINTER INK	
State: District:					
<b>C.</b>		Full Name (Last, First, Middle Initial) US Post Office		Transaction ID: 90921.E19301 Date of Disbursement 09 / 11 / 2008	
Mailing Address		401 Kellogg Blvd E		Amount of Each Disbursement this Period 7.65	
City Saint Paul		State MN		Zip Code 55101-	
Purpose of Disbursement FRANZE - ENVELOPES		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: FRANZE - ENVELOPES	
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)

PAGE 101 / 255

<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 Moorhead Postal Store

City Moorhead State MN Zip Code 56560-

Purpose of Disbursement  
FRANZE - POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E19481

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5.99

**[MEMO ITEM]**

MEMO: FRANZE - POSTAGE

**B.**

Full Name (Last, First, Middle Initial)  
Karen Franze

Mailing Address 100 1st. Street Se  
P.o. Box 829

City Pelican Rapids State MN Zip Code 56572-

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.E19482

Date of Disbursement

/   /

Amount of Each Disbursement this Period

573.04

REIMBURSE FOR MILAGE

**C.**

Full Name (Last, First, Middle Initial)  
Fundraising Associates

Mailing Address 7705 Tanglewood Ct

City Minneapolis State MN Zip Code 55439-

Purpose of Disbursement  
Party Fundraising Consulting Servic

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E19724

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

PARTY FUNDRAISING CONSULT-  
ING SERVIC

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

1573.04

**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)

PAGE 102 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Timothy Gould	<b>Transaction ID:</b> 90921.E19837 <b>Date of Disbursement</b>
Mailing Address 192 Linden Circle	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 0 8</div> </div>
City Apple Valley State MN Zip Code 55124-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Reimburse for mileage	<div>365.04</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>REIMBURSE FOR MILEAGE</b>	
<b>B.</b> Full Name (Last, First, Middle Initial) Bryan Humphreys	<b>Transaction ID:</b> 90921.E19316 <b>Date of Disbursement</b>
Mailing Address 605 Harriet Ave Apt 607	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55126-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Reimburse for mileage/parking	<div>323.00</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>REIMBURSE FOR MILEAGE/PARKING</b>	
<b>C.</b> Full Name (Last, First, Middle Initial) Bryan Humphreys	<b>Transaction ID:</b> 90921.E19318 <b>Date of Disbursement</b>
Mailing Address 605 Harriet Ave Apt 607	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55126-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement SEE BELOW: Reimburse for meal	<div>36.63</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>SEE BELOW: REIMBURSE FOR MEAL</b>	

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

**724.67**

**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 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) El Bravo Mailing Address 538 Rice St	<b>Transaction ID:</b> 90921.E19319 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55103-2116 Purpose of Disbursement HUMPHREYS - 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>19.94</div> <b>[MEMO ITEM]</b> MEMO: HUMPHREYS - MEAL
<b>B.</b> Full Name (Last, First, Middle Initial) Perkins St. Paul Mailing Address 1979 Old Hudson Rd City Saint Paul State MN Zip Code 55119-4395 Purpose of Disbursement HUMPHREYS - 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) ▼	<b>Transaction ID:</b> 90921.E19320 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>16.69</div> <b>[MEMO ITEM]</b> MEMO: HUMPHREYS - MEAL
<b>C.</b> Full Name (Last, First, Middle Initial) Bryan Humphreys Mailing Address 605 Harriet Ave Apt 607 City Saint Paul State MN Zip Code 55126- 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) ▼	<b>Transaction ID:</b> 90921.E19857 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 0 8</div> </div> Amount of Each Disbursement this Period <div>215.66</div> REIMBURSE FOR MILAGE

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

**215.66**

**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)

PAGE 104 / 255

<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)

Bryan Humphreys

Mailing Address 605 Harriet Ave Apt 607

City State Zip Code  
Saint Paul MN 55126-

Purpose of Disbursement  
SEE BELOW: Reimburse for meals

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E19858

Date of Disbursement

/   /

Amount of Each Disbursement this Period

83.04

SEE BELOW: REIMBURSE FOR MEALS

**B.**

Full Name (Last, First, Middle Initial)

Cub Foods - St. Paul

Mailing Address 100 County Road B W

City State Zip Code  
Saint Paul MN 55117-1948

Purpose of Disbursement  
HUMPHREYS - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E19860

Date of Disbursement

/   /

Amount of Each Disbursement this Period

12.38

**[MEMO ITEM]**

MEMO: HUMPHREYS - MEAL

**C.**

Full Name (Last, First, Middle Initial)

Jimmy Johns

Mailing Address 6001 Shady Oak Rd S

City State Zip Code  
Hopkins MN 55343-8969

Purpose of Disbursement  
HUMPHEYS - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E19861

Date of Disbursement

/   /

Amount of Each Disbursement this Period

53.33

**[MEMO ITEM]**

MEMO: HUMPHEYS - MEAL

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

83.04

**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)

PAGE 105 / 255

<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)

Panera Bread

Mailing Address 1260 Promenade Pl

City State Zip Code  
Saint Paul MN 55121-2299

Purpose of Disbursement  
HUMPHREYS - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19862

Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

7.66

**[MEMO ITEM]**

MEMO: HUMPHREYS - MEAL

**B.**

Full Name (Last, First, Middle Initial)

Taco Bell

Mailing Address 8450 Joiner Way

City State Zip Code  
Minneapolis MN 55433-

Purpose of Disbursement  
HUMPHREYS - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19859

Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

9.67

**[MEMO ITEM]**

MEMO: HUMPHREYS - MEAL

**C.**

Full Name (Last, First, Middle Initial)

Norlight, Inc

Mailing Address PO Box 740094

City State Zip Code  
Cincinnati OH 45274-0094

Purpose of Disbursement  
Telephone Long Distance Service

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19281

Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

1135.82

TELEPHONE LONG DISTANCE  
SERVICE

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

1135.82

**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 106 / 255

<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)  
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.E19735

Date of Disbursement

09 / 18 / 2008

Amount of Each Disbursement this Period

650.38

TELEPHONE LONG DISTANCE  
SERVICE

**B.**

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

Mailing Address 5325 Zuni St # 728

City Denver State CO Zip Code 80221-1499

Purpose of Disbursement  
Office Phone & Internet

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E24831

Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

261.42

OFFICE PHONE & INTERNET

**C.**

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

Mailing Address 5325 Zuni St # 728

City Denver State CO Zip Code 80221-1499

Purpose of Disbursement  
Office Phone & Internet

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E24834

Date of Disbursement

09 / 18 / 2008

Amount of Each Disbursement this Period

317.03

OFFICE PHONE & INTERNET

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

1228.83

**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)

PAGE 107 / 255

<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)

Qwest Inc

Mailing Address 5325 Zuni St # 728

City State Zip Code  
Denver CO 80221-1499

Purpose of Disbursement  
Office Phone & Internet

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E24863

Date of Disbursement

/   /

Amount of Each Disbursement this Period

321.32

OFFICE PHONE & INTERNET

**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  
Reimburse for milage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E19295

Date of Disbursement

/   /

Amount of Each Disbursement this Period

131.82

REIMBURSE FOR MILAGE

**C.**

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  
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.E19296

Date of Disbursement

/   /

Amount of Each Disbursement this Period

163.33

SEE BELOW: REIMB FOR PHONE

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

616.47

**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)

PAGE 108 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address P.O. Box 790422	<b>Transaction ID:</b> 90921.E19297 <b>Date of Disbursement</b> <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>0</td><td>9</td><td></td><td>1</td><td>1</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	0	9		1	1		2	0	0	8										
M	M	/	D	D	/	Y	Y	Y	Y																						
0	9		1	1		2	0	0	8																						
City St. Louis State MO Zip Code 63179- Purpose of Disbursement KIRKPATRICK - 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) ▼	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">163.33</td> </tr> </table> <b>[MEMO ITEM]</b> MEMO: KIRKPATRICK - TELEPHONE	163.33																													
163.33																															
<b>B.</b> 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: 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) ▼	<b>Transaction ID:</b> 90921.E19849 <b>Date of Disbursement</b> <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>0</td><td>9</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> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">57.30</td> </tr> </table> SEE BELOW: REIMBURSE FOR MEAL	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	8	57.30									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	9		2	5		2	0	0	8																						
57.30																															
<b>C.</b> Full Name (Last, First, Middle Initial) Dominos Pizza - St. Paul Mailing Address 1231 Pierce Butler Rte City Saint Paul State MN Zip Code 55104-1452 Purpose of Disbursement KIRKPATRICK- 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) ▼	<b>Transaction ID:</b> 90921.E19850 <b>Date of Disbursement</b> <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>0</td><td>9</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> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">57.30</td> </tr> </table> <b>[MEMO ITEM]</b> MEMO: KIRKPATRICK- MEAL	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	8	57.30									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	9		2	5		2	0	0	8																						
57.30																															

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

57.30

**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)

PAGE 109 / 255

<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  
Reimburse for mileage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 90921.E19848  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

110.14

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  
Reimburse for mileage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 90921.E19828  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

65.03

REIMBURSE FOR MILEAGE

**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.E19273  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

344.00

OFFICE RENT

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

519.17

**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 110 / 255

<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.E19793

Date of Disbursement

/   /

Amount of Each Disbursement this Period

350.00

OFFICE RENT

**B.**

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.E19725

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

GEN. PARTY FUNDRAISING CO-  
NSULTING

**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  
SEE BELOW: Reimb for meals/paper

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19763

Date of Disbursement

/   /

Amount of Each Disbursement this Period

154.40

SEE BELOW: REIMB FOR MEAL-  
S/PAPER

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

2504.40

**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 111 / 255

<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)  
Ikea

Mailing Address Mall Of America  
8000 Ikea Way

City Bloomington State MN Zip Code 55137-

Purpose of Disbursement  
MEYER - OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 90921.E19768

Date of Disbursement

09 / 18 / 2008

Amount of Each Disbursement this Period

18.14

**[MEMO ITEM]**

MEMO: MEYER - OFFICE SUPPLIES

**B.**

Full Name (Last, First, Middle Initial)  
PAPA JOHNS

Mailing Address 1071 Grand Ave

City Saint Paul State MN Zip Code 55105-3002

Purpose of Disbursement  
MEYER - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 90921.E19764

Date of Disbursement

09 / 18 / 2008

Amount of Each Disbursement this Period

72.89

**[MEMO ITEM]**

MEMO: MEYER - MEAL

**C.**

Full Name (Last, First, Middle Initial)  
Dominos Pizza - St. Paul

Mailing Address 1231 Pierce Butler Rte

City Saint Paul State MN Zip Code 55104-1452

Purpose of Disbursement  
MEYER - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 90921.E19765

Date of Disbursement

09 / 18 / 2008

Amount of Each Disbursement this Period

16.48

**[MEMO ITEM]**

MEMO: MEYER - 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)

PAGE 112 / 255

<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)  
Chipotle

Mailing Address 860 Rosedale Center Plaza

City Saint Paul State MN Zip Code 55113-

Purpose of Disbursement  
MEYER - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 90921.E19766

Date of Disbursement

09 / 18 / 2008

Amount of Each Disbursement this Period

21.02

**[MEMO ITEM]**

MEMO: MEYER - MEAL

**B.**

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  
MEYER - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 90921.E19767

Date of Disbursement

09 / 18 / 2008

Amount of Each Disbursement this Period

25.87

**[MEMO ITEM]**

MEMO: MEYER - MEAL

**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  
Reimburse for milage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 90921.E19762

Date of Disbursement

09 / 18 / 2008

Amount of Each Disbursement this Period

113.98

REIMBURSE FOR MILAGE

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

113.98

**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 113 / 255

<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)

John T. Meyer

Mailing Address 1425 Jessamine Ave W  
Apt. 110

City Saint Paul State MN Zip Code 55108-

Purpose of Disbursement  
SEE BELOW: Reimb for meals/paper

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 90921.E19852

Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

118.65

SEE BELOW: REIMB FOR MEAL-  
S/PAPER

**B.**

Full Name (Last, First, Middle Initial)

PAPA JOHNS

Mailing Address 1071 Grand Ave

City Saint Paul State MN Zip Code 55105-3002

Purpose of Disbursement  
MEYER - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 90921.E19853

Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]  
MEMO: MEYER - MEAL

**C.**

Full Name (Last, First, Middle Initial)

Dominos Pizza - St. Paul

Mailing Address 1231 Pierce Butler Rte

City Saint Paul State MN Zip Code 55104-1452

Purpose of Disbursement  
MEYER - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 90921.E19856

Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

29.32

[MEMO ITEM]  
MEMO: MEYER - MEAL

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

118.65

**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 114 / 255

<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)

Rainbow Foods

Mailing Address 1566 University Ave

City State Zip Code  
St. Paul MN 55103-

Purpose of Disbursement

MEYER - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 90921.E19855

Date of Disbursement

/   /

Amount of Each Disbursement this Period

44.85

**[MEMO ITEM]**

MEMO: MEYER - MEAL

**B.**

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

MEYER - OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 90921.E19854

Date of Disbursement

/   /

Amount of Each Disbursement this Period

19.48

**[MEMO ITEM]**

MEMO: MEYER - OFFICE SUPPLIES

**C.**

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

Reimburse for milage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 90921.E19851

Date of Disbursement

/   /

Amount of Each Disbursement this Period

28.70

REIMBURSE FOR MILAGE

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

28.70

**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 115 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Lexis Nexis Mailing Address Po Box 2314	<b>Transaction ID:</b> 90921.E19736 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 8 / 2 0 0 8</div> </div>
City State Zip Code Carol Stream IL 60132- Purpose of Disbursement Office Computer Services 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>	<b>Amount of Each Disbursement this Period</b> <div>463.00</div> <b>OFFICE COMPUTER SERVICES</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Southwest Plastic Binding Company Mailing Address 109 Millwell Drive City State Zip Code Maryland Hts. MO 63043- Purpose of Disbursement Yard Signs/exempt 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>	<b>Transaction ID:</b> 90921.E19728 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 8 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>271.53</div> <b>YARD SIGNS/EXEMPT</b>
<b>C.</b> 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 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>	<b>Transaction ID:</b> 90921.E19450 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1587.23</div> <b>PARTY TELEPHONE/NON FEA</b>

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

**2321.76**

**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)

PAGE 116 / 255

<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  
Permit Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19327

Date of Disbursement

/   /

Amount of Each Disbursement this Period

PERMIT FEE

**B.**

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 Postage/non candidate

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19345

Date of Disbursement

/   /

Amount of Each Disbursement this Period

PARTY POSTAGE/NON CANDIDA-  
TE

**C.**

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 Postage/non candidate

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19980

Date of Disbursement

/   /

Amount of Each Disbursement this Period

PARTY POSTAGE/NON CANDIDA-  
TE

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

**5230.00**

**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 117 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) US Post Office	<b>Transaction ID:</b> 90921.E19795 <b>Date of Disbursement</b>
Mailing Address 401 Kellogg Blvd E	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55101- Purpose of Disbursement Party Postage/non candidate Candidate Name	Amount of Each Disbursement this Period <div>2500.00</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 PARTY POSTAGE/NON CANDIDA-TE
<b>B.</b> Full Name (Last, First, Middle Initial) US Post Office	<b>Transaction ID:</b> 90921.E19785 <b>Date of Disbursement</b>
Mailing Address 401 Kellogg Blvd E	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55101- Purpose of Disbursement Permit Fee Candidate Name	Amount of Each Disbursement this Period <div>360.00</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 PERMIT FEE
<b>C.</b> Full Name (Last, First, Middle Initial) Fifth Congressional Republican District	<b>Transaction ID:</b> 90921.E20020 <b>Date of Disbursement</b>
Mailing Address PO Box 32801	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 0 8</div> </div>
City Fridley State MN Zip Code 55432-0801 Purpose of Disbursement Usual/Normal Office Rent Candidate Name	Amount of Each Disbursement this Period <div>1888.54</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 USUAL/NORMAL OFFICE RENT

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

**4748.54**

**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 118 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Joshua Revak Mailing Address 74732 240th St	<b>Transaction ID:</b> 90921.E19750 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 8 / 2 0 0 8</div> </div>
City Dassel State MN Zip Code 55325-3451 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) ▼	<b>Amount of Each Disbursement this Period</b> <div>263.96</div> <b>REIMBURSE FOR MILEAGE</b>
<b>B.</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: Reimb for meals/paper 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>Transaction ID:</b> 90921.E19830 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>265.19</div> <b>SEE BELOW: REIMB FOR MEAL-S/PAPER</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Caribou Coffee Mailing Address 3044 Excelsior Blvd City Minneapolis State MN Zip Code 55416-4662 Purpose of Disbursement REVAK - 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) ▼	<b>Transaction ID:</b> 90921.E19833 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>53.59</div> <b>[MEMO ITEM]</b> <b>MEMO: REVAK - MEAL</b>

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

**529.15**

**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)

PAGE 119 / 255

<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)  
Holiday Gas Station

Mailing Address 601 Coon Rapids Blvd NW

City Minneapolis State MN Zip Code 55433-5508

Purpose of Disbursement  
REVAK - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19834

Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

37.28

**[MEMO ITEM]**

MEMO: REVAK - MEAL

**B.**

Full Name (Last, First, Middle Initial)  
Office Max - Minneapolis

Mailing Address 10431 Baltimore St NE

City Minneapolis State MN Zip Code 55449-4672

Purpose of Disbursement  
REVAK - OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19835

Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

28.23

**[MEMO ITEM]**

MEMO: REVAK - OFFICE SUPPLIES

**C.**

Full Name (Last, First, Middle Initial)  
Figaros Pizza

Mailing Address 10400 Baltimore St NE

City Minneapolis State MN Zip Code 55449-4681

Purpose of Disbursement  
REVAK - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19832

Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

146.09

**[MEMO ITEM]**

MEMO: REVAK - 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)

PAGE 120 / 255

<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.E19829

Date of Disbursement

/   /

Amount of Each Disbursement this Period

47.36

REIMBURSE FOR MILEGE

**B.**

Full Name (Last, First, Middle Initial)  
Julia Ruetten

Mailing Address 1342 Coach St Apt 122

City Saint Paul State MN Zip Code 55108-5296

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.E19770

Date of Disbursement

/   /

Amount of Each Disbursement this Period

825.17

REIMBURSE FOR MILEGE

**C.**

Full Name (Last, First, Middle Initial)  
Julia Ruetten

Mailing Address 1342 Coach St Apt 122

City Saint Paul State MN Zip Code 55108-5296

Purpose of Disbursement  
SEE BELOW: Reimb - lodging/supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19771

Date of Disbursement

/   /

Amount of Each Disbursement this Period

146.75

SEE BELOW: REIMB - LODGIN-  
G/SUPPLIES

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

1019.28

**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 / 255

<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)  
Walmart - Cambridge

Mailing Address 2101 2nd Ave SE

City State Zip Code  
Cambridge MN 55008-4137

Purpose of Disbursement  
RUETTEN - OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E19780

Date of Disbursement

/   /

Amount of Each Disbursement this Period

9.26

**[MEMO ITEM]**

MEMO: RUETTEN - OFFICE SUPPLIES

**B.**

Full Name (Last, First, Middle Initial)  
Dollar Tree

Mailing Address 5115 Burning Tree Rd

City State Zip Code  
Duluth MN 55811-1876

Purpose of Disbursement  
RUETTEN - OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E19775

Date of Disbursement

/   /

Amount of Each Disbursement this Period

13.98

**[MEMO ITEM]**

MEMO: RUETTEN - OFFICE SUPPLIES

**C.**

Full Name (Last, First, Middle Initial)  
Super One Foods

Mailing Address 15 So. 13th Avenue East

City State Zip Code  
Duluth MN 55802-

Purpose of Disbursement  
RUETTEN - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E19777

Date of Disbursement

/   /

Amount of Each Disbursement this Period

15.20

**[MEMO ITEM]**

MEMO: RUETTEN - 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)

PAGE 122 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Office Max - Duluth	<b>Transaction ID:</b> 90921.E19779 <b>Date of Disbursement</b>																				
Mailing Address 1023 W Central Entrance	<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>0</td><td>9</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	0	9		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	8		2	0	0	8												
City Duluth State MN Zip Code 55811-5477	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement RUETTEN - OFFICE SUPPLIES	<table border="1"> <tr> <td colspan="10">9.62</td> </tr> </table>	9.62																			
9.62																					
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>B.</b> Full Name (Last, First, Middle Initial) Super 8 Motel	<b>Transaction ID:</b> 90921.E19772 <b>Date of Disbursement</b>																				
Mailing Address 1815 Paul Bunyan Dr 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>0</td><td>9</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	0	9		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	8		2	0	0	8												
City Bemidji State MN Zip Code 56601-5602	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement RUETTEN - LODGING	<table border="1"> <tr> <td colspan="10">76.98</td> </tr> </table>	76.98																			
76.98																					
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>C.</b> Full Name (Last, First, Middle Initial) Menards - St. Paul	<b>Transaction ID:</b> 90921.E19778 <b>Date of Disbursement</b>																				
Mailing Address 2005 University Ave W	<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>0</td><td>9</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	0	9		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	8		2	0	0	8												
City Saint Paul State MN Zip Code 55104-3431	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement RUETTEN - OFFICE SUPPLIES	<table border="1"> <tr> <td colspan="10">2.45</td> </tr> </table>	2.45																			
2.45																					
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)

PAGE 123 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Bemidji State University	<b>Transaction ID:</b> 90921.E19773 <b>Date of Disbursement</b>																				
Mailing Address Pine Hall	<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>0</td><td>9</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	0	9		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	8		2	0	0	8												
City Bemidji State MN Zip Code 56601-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement RUETTEN - LODGING	<table border="1"> <tr> <td colspan="10">16.05</td> </tr> </table>	16.05																			
16.05																					
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>B.</b> Full Name (Last, First, Middle Initial) Walgreens	<b>Transaction ID:</b> 90921.E19774 <b>Date of Disbursement</b>																				
Mailing Address 1301 E Superior 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>0</td><td>9</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	0	9		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	8		2	0	0	8												
City Duluth State MN Zip Code 55805-2429	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement RUETTEN - OFFICE SUPPLIES	<table border="1"> <tr> <td colspan="10">3.21</td> </tr> </table>	3.21																			
3.21																					
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>C.</b> Full Name (Last, First, Middle Initial) Julia Ruetten	<b>Transaction ID:</b> 90921.E19836 <b>Date of Disbursement</b>																				
Mailing Address 1342 Coach St Apt 122	<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>0</td><td>9</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	0	9		2	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	5		2	0	0	8												
City Saint Paul State MN Zip Code 55108-5296	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Reimburse for milage	<table border="1"> <tr> <td colspan="10">276.34</td> </tr> </table>	276.34																			
276.34																					
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) .....

276.34

**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)

PAGE 124 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Coleman For Senate Mailing Address 680 Transfer Rd	<b>Transaction ID:</b> 90921.E19791 <b>Date of Disbursement</b> <div> <div>09</div> <div>25</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55114-4502 Purpose of Disbursement Office Rent-Regular and Usual Rate 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>Amount of Each Disbursement this Period</b> <div>1100.00</div> <b>OFFICE RENT-REGULAR AND USUAL RATE</b>
<b>B.</b> 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: Payment of Credit Card 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>Transaction ID:</b> 90921.E20085 <b>Date of Disbursement</b> <div> <div>09</div> <div>09</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>3147.15</div> <b>SEE BELOW: PAYMENT OF CREDIT CARD</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Godaddy Mailing Address 14455 N Hayden Rd Ste 219 SUITE 219 City Scottsdale State AZ Zip Code 85260-6947 Purpose of Disbursement CC - DOMAIN NAME REG 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>Transaction ID:</b> 90921.E19901 <b>Date of Disbursement</b> <div> <div>09</div> <div>09</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>38.36</div> <b>[MEMO ITEM]</b> <b>MEMO: CC - DOMAIN NAME REG</b>

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

**4247.15**

**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)

PAGE 125 / 255

<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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Election Mall Technology</p> <p>Mailing Address 1101 Pennsylvania Ave NW 6th Fl</p> <p>City Washington State DC Zip Code 20004-</p> <p>Purpose of Disbursement CC-Online Fundraising-Non candidate</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90921.E19893</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 400.00</p> <p><b>[MEMO ITEM]</b> MEMO: CC-ONLINE FUNDRAISI- NG-NON CANDIDATE</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Election Mall Technology</p> <p>Mailing Address 1101 Pennsylvania Ave NW 6th Fl</p> <p>City Washington State DC Zip Code 20004-</p> <p>Purpose of Disbursement CC-Online Fundraising-Non candidate</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90921.E19909</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 495.00</p> <p><b>[MEMO ITEM]</b> MEMO: CC-ONLINE FUNDRAISI- NG-NON CANDIDATE</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Tivo</p> <p>Mailing Address 2180 Gold Street</p> <p>City Alviso State CA Zip Code 95002-</p> <p>Purpose of Disbursement CC - SERVICE CHARGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 90921.E19906</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 6.95</p> <p><b>[MEMO ITEM]</b> MEMO: CC - SERVICE CHARGE</p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ► 0.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ►</p>	

# **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 126 / 255

<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)  
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.E19908

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6.95

**[MEMO ITEM]**

MEMO: CC - SERVICE CHARGE

**B.**

Full Name (Last, First, Middle Initial)  
Toll Gas & Welding Supply

Mailing Address 3005 Niagara Lane North

City State Zip Code  
Plymouth MN 55447-

Purpose of Disbursement  
CC - HELIUM/STATE FAIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19905

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2199.83

**[MEMO ITEM]**

MEMO: CC - HELIUM/STATE FAIR

**C.**

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

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19864

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2457.57

SEE BELOW: CC PAYMENT

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

2457.57

**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 127 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Baja Sol	<b>Transaction ID:</b> 90921.E19879 <b>Date of Disbursement</b>
Mailing Address 2922 Upper 55th St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 8</div> </div>
City Inver Grove Height State MN Zip Code 55076-1673 Purpose of Disbursement CC - MEAL Candidate Name	Amount of Each Disbursement this Period <div>28.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: CC - MEAL
<b>B.</b> Full Name (Last, First, Middle Initial) Billy On Grand	<b>Transaction ID:</b> 90921.E19877 <b>Date of Disbursement</b>
Mailing Address 857 Grand Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55105-3398 Purpose of Disbursement CC - MEAL Candidate Name	Amount of Each Disbursement this Period <div>34.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: CC - MEAL
<b>C.</b> Full Name (Last, First, Middle Initial) Blink Bonnie	<b>Transaction ID:</b> 90921.E19886 <b>Date of Disbursement</b>
Mailing Address 237 E. 7th Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 8</div> </div>
City St. Paul State MN Zip Code 55101- Purpose of Disbursement CC - MEAL Candidate Name	Amount of Each Disbursement this Period <div>16.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> 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)

PAGE 128 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) El Bravo	<b>Transaction ID:</b> 90921.E19880 <b>Date of Disbursement</b>																				
Mailing Address 538 Rice 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>0</td><td>9</td><td></td><td>2</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	0	9		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	9		2	0	0	8												
City Saint Paul State MN Zip Code 55103-2116	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CC - MEAL	<table border="1"> <tr> <td colspan="10">118.71</td> </tr> </table>	118.71																			
118.71																					
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>B.</b> Full Name (Last, First, Middle Initial) D Brians	<b>Transaction ID:</b> 90921.E19884 <b>Date of Disbursement</b>																				
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>0</td><td>9</td><td></td><td>2</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	0	9		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	9		2	0	0	8												
City Saint Paul State MN Zip Code 55101-2103	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CC - MEAL	<table border="1"> <tr> <td colspan="10">19.01</td> </tr> </table>	19.01																			
19.01																					
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>C.</b> Full Name (Last, First, Middle Initial) CellPhone Battery Warehouse	<b>Transaction ID:</b> 90921.E19904 <b>Date of Disbursement</b>																				
Mailing Address 1020 Whispering Pines Ln Ste F Suite F	<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>0</td><td>9</td><td></td><td>2</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	0	9		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	9		2	0	0	8												
City Grass Valley State CA Zip Code 95945-7862	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CC - CELL PHONE BATTERY	<table border="1"> <tr> <td colspan="10">202.55</td> </tr> </table>	202.55																			
202.55																					
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)

PAGE 129 / 255

☒ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Nelsons Cheese & Deli	<b>Transaction ID:</b> 90921.E19898 <b>Date of Disbursement</b>
Mailing Address 1562 Como Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 8</div> </div>
City State Zip Code St. Paul MN 55108- Purpose of Disbursement CC - MEAL Candidate Name	Amount of Each Disbursement this Period <div>196.15</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>[MEMO ITEM]</b> MEMO: CC - MEAL
<b>B.</b> Full Name (Last, First, Middle Initial) El Amanecer	<b>Transaction ID:</b> 90921.E19882 <b>Date of Disbursement</b>
Mailing Address 194 Cesar Chavez St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 8</div> </div>
City State Zip Code Saint Paul MN 55107-2310 Purpose of Disbursement CC - MEAL Candidate Name	Amount of Each Disbursement this Period <div>26.36</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>[MEMO ITEM]</b> MEMO: CC - MEAL
<b>C.</b> Full Name (Last, First, Middle Initial) Florida Business Information	<b>Transaction ID:</b> 90921.E19900 <b>Date of Disbursement</b>
Mailing Address P.o. Box 193	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 8</div> </div>
City State Zip Code Bell FL 32619- Purpose of Disbursement CC - CLIP SERVICE Candidate Name	Amount of Each Disbursement this Period <div>169.00</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) ▼	<b>[MEMO ITEM]</b> MEMO: CC - CLIP SERVICE

**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 130 / 255

<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)  
Hardware Hank

Mailing Address 1320 Duckwood Dr

City State Zip Code  
Saint Paul MN 55123-

Purpose of Disbursement  
CC - OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19895

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.62

**[MEMO ITEM]**

MEMO: CC - OFFICE SUPPLIES

**B.**

Full Name (Last, First, Middle Initial)  
PayPal Inc.

Mailing Address 2211 N 1st St

City State Zip Code  
San Jose CA 95131-2021

Purpose of Disbursement  
CC - CELL PHONE PURCHASE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19888

Date of Disbursement

/   /

Amount of Each Disbursement this Period

170.00

**[MEMO ITEM]**

MEMO: CC - CELL PHONE PURCHASE

**C.**

Full Name (Last, First, Middle Initial)  
Jimmy Johns

Mailing Address 975 Grand Ave

City State Zip Code  
Saint Paul MN 55105-3053

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.E19878

Date of Disbursement

/   /

Amount of Each Disbursement this Period

138.53

**[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)

PAGE 131 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) The Liffey Mailing Address 175 7th St W	<b>Transaction ID:</b> 90921.E19871 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55102-2520 Purpose of Disbursement CC - 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:	<b>Amount of Each Disbursement this Period</b> <div>44.63</div> <b>[MEMO ITEM]</b> MEMO: CC - MEAL
<b>B.</b> Full Name (Last, First, Middle Initial) Little Caesars Mailing Address 1532 University Ave W City Saint Paul State MN Zip Code 55104-3900 Purpose of Disbursement CC - 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:	<b>Transaction ID:</b> 90921.E19869 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>60.00</div> <b>[MEMO ITEM]</b> MEMO: CC - MEAL
<b>C.</b> Full Name (Last, First, Middle Initial) Louisiana Cafe Mailing Address 613 Selby Ave City St. Paul State MN Zip Code 55102- Purpose of Disbursement CC - 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:	<b>Transaction ID:</b> 90921.E19865 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>26.72</div> <b>[MEMO ITEM]</b> 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)

PAGE 132 / 255

<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)  
Election Mall Technology

Mailing Address 1101 Pennsylvania Ave NW  
6th Fl

City Washington State DC Zip Code 20004-

Purpose of Disbursement  
CC-Online Fundraising-Non candidate

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19910

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

495.00

**[MEMO ITEM]**

MEMO: CC-ONLINE FUNDRAISI-  
NG-NON CANDIDATE

**B.**

Full Name (Last, First, Middle Initial)  
Minnesota State Fair

Mailing Address 1265 Snelling Ave N

City St Paul State MN Zip Code 55108-

Purpose of Disbursement  
CC - STATE FAIR TICKET

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19890

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

11.00

**[MEMO ITEM]**

MEMO: CC - STATE FAIR TIC-  
KET

**C.**

Full Name (Last, First, Middle Initial)  
Newegg.com

Mailing Address 9997 Rose Hills Rd

City Whittier State CA Zip Code 90601-1701

Purpose of Disbursement  
CC - COMPUTER SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19902

Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

69.99

**[MEMO ITEM]**

MEMO: CC - COMPUTER SERVI-  
CES

**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 133 / 255

<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)  
Loop Parking Company

Mailing Address 1300 Nicollet Ave

City Minneapolis State MN Zip Code 55403-2667

Purpose of Disbursement  
CC - PARKING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E19872

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8.00

**[MEMO ITEM]**

MEMO: CC - PARKING

**B.**

Full Name (Last, First, Middle Initial)  
Loop Parking Company

Mailing Address 1300 Nicollet Ave

City Minneapolis State MN Zip Code 55403-2667

Purpose of Disbursement  
CC - PARKING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E19874

Date of Disbursement

/   /

Amount of Each Disbursement this Period

13.00

**[MEMO ITEM]**

MEMO: CC - PARKING

**C.**

Full Name (Last, First, Middle Initial)  
Loop Parking Company

Mailing Address 1300 Nicollet Ave

City Minneapolis State MN Zip Code 55403-2667

Purpose of Disbursement  
CC - PARKING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E19873

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6.75

**[MEMO ITEM]**

MEMO: CC - PARKING

**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 134 / 255

<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)  
Loop Parking Company

Mailing Address 1300 Nicollet Ave

City Minneapolis State MN Zip Code 55403-2667

Purpose of Disbursement  
CC - PARKING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E19876

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**

MEMO: CC - PARKING

**B.**

Full Name (Last, First, Middle Initial)  
Loop Parking Company

Mailing Address 1300 Nicollet Ave

City Minneapolis State MN Zip Code 55403-2667

Purpose of Disbursement  
CC - PARKING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E19875

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**

MEMO: CC - PARKING

**C.**

Full Name (Last, First, Middle Initial)  
Dominos Pizza - Downtown St. Paul

Mailing Address 477 Saint Peter St

City Saint Paul State MN Zip Code 55102-1110

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.E19883

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**[MEMO ITEM]**

MEMO: CC - MEAL

**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)

PAGE 135 / 255

<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)  
Potbelly

Mailing Address 444 Cedar St

City State Zip Code  
Saint Paul MN 55101-2103Purpose of Disbursement  
CC - MEAL

Candidate Name

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

State: District:

Transaction ID: 90921.E19866

Date of Disbursement

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

Amount of Each Disbursement this Period

12.61

**[MEMO ITEM]**

MEMO: CC - MEAL

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

Mailing Address 1566 University Ave

City State Zip Code  
St. Paul MN 55103-Purpose of Disbursement  
CC - MEAL

Candidate Name

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

State: District:

Transaction ID: 90921.E19881

Date of Disbursement

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

Amount of Each Disbursement this Period

13.52

**[MEMO ITEM]**

MEMO: CC - MEAL

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

Mailing Address 1276 Town Center Dr

City State Zip Code  
Saint Paul MN 55123-Purpose of Disbursement  
CC - MEAL

Candidate Name

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

State: District:

Transaction ID: 90921.E19896

Date of Disbursement

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

Amount of Each Disbursement this Period

99.35

**[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)

PAGE 136 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Chipotle	<b>Transaction ID:</b> 90921.E19867 <b>Date of Disbursement</b>																				
Mailing Address 867 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>0</td><td>9</td><td></td><td>2</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	0	9		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	9		2	0	0	8												
City St. Paul State MN Zip Code 55105-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CC - MEAL	<table border="1"> <tr> <td colspan="10">12.82</td> </tr> </table>	12.82																			
12.82																					
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>B.</b> Full Name (Last, First, Middle Initial) Shamrocks	<b>Transaction ID:</b> 90921.E19885 <b>Date of Disbursement</b>																				
Mailing Address 995 7th St W	<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>0</td><td>9</td><td></td><td>2</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	0	9		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	9		2	0	0	8												
City Saint Paul State MN Zip Code 55102-3519	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CC - MEAL	<table border="1"> <tr> <td colspan="10">61.15</td> </tr> </table>	61.15																			
61.15																					
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>C.</b> Full Name (Last, First, Middle Initial) Minards	<b>Transaction ID:</b> 90921.E19870 <b>Date of Disbursement</b>																				
Mailing Address 10251 Baltimore St 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>0</td><td>9</td><td></td><td>2</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	0	9		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	9		2	0	0	8												
City Minneapolis State MN Zip Code 55449-4674	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CC - OFFICE SUPPLIES	<table border="1"> <tr> <td colspan="10">105.64</td> </tr> </table>	105.64																			
105.64																					
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)

PAGE 137 / 255

☒ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Target Superstore	<b>Transaction ID:</b> 90921.E19868 <b>Date of Disbursement</b>
Mailing Address 1300 University Ave W	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55104-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement CC - OFFICE SUPPLIES	<div>18.82</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: CC - OFFICE SUPPLIES
<b>B.</b> Full Name (Last, First, Middle Initial) Tiger Direct	<b>Transaction ID:</b> 90921.E19903 <b>Date of Disbursement</b>
Mailing Address 7795 W Flagler St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 8</div> </div>
City Miami State FL Zip Code 33144-2359	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement CC - COMPUTER MONITOR	<div>184.71</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: CC - COMPUTER MONITOR
<b>C.</b> Full Name (Last, First, Middle Initial) Tivo	<b>Transaction ID:</b> 90921.E19907 <b>Date of Disbursement</b>
Mailing Address 2180 Gold Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 9 / 2 0 0 8</div> </div>
City Alviso State CA Zip Code 95002-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement CC - SERVICE CHARGE	<div>12.95</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: CC - SERVICE CHARGE

**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 138 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Prime Signs	<b>Transaction ID:</b> 90921.E19808 <b>Date of Disbursement</b>
Mailing Address 925 University Ave Ste B #B	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 0 8</div> </div>
City Sacramento State CA Zip Code 95825-6709	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Exempt Yard Signs	<div>46361.00</div>
Candidate Name JOHN S. MCCAIN	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
EXEMPT YARD SIGNS	
<b>B.</b> Full Name (Last, First, Middle Initial) Andrew C. Stakston	<b>Transaction ID:</b> 90921.E19293 <b>Date of Disbursement</b>
Mailing Address 8731 Pheasant Run Cir	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55125-8606	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement SEE BELOW: Reimburse for meal	<div>4.79</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: REIMBURSE FOR MEAL	
<b>C.</b> Full Name (Last, First, Middle Initial) Einstein Brothers Bagels	<b>Transaction ID:</b> 90921.E19294 <b>Date of Disbursement</b>
Mailing Address 187 Cheshire Ln N	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div>
City Minneapolis State MN Zip Code 55441-5453	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement STAKSTON - FOOD	<div>4.79</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: STAKSTON - FOOD	

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

46365.79

**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 139 / 255

<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 C. Stakston

Mailing Address 8731 Pheasant Run Cir

City Saint Paul State MN Zip Code 55125-8606

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.E19292

Date of Disbursement

/   /

Amount of Each Disbursement this Period

77.90

REIMBURSE FOR MILEAGE

**B.**

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  
Reimburse for mileage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19839

Date of Disbursement

/   /

Amount of Each Disbursement this Period

16.28

REIMBURSE FOR MILEAGE

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey Woods

Mailing Address 14610 Bowers Dr NW

City Anoka State MN Zip Code 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.E19438

Date of Disbursement

/   /

Amount of Each Disbursement this Period

222.84

REIMBURSE FOR MILEAGE

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

317.02

**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)

PAGE 140 / 255

<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)

Jeffrey Woods

Mailing Address 14610 Bowers Dr NW

City Anoka State MN Zip Code 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.E19443

Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

203.28

REIMBURSE FOR MILAGE

**B.**

Full Name (Last, First, Middle Initial)

Jeffrey Woods

Mailing Address 14610 Bowers Dr NW

City Anoka State MN Zip Code 55303-7209

Purpose of Disbursement  
SEE BELOW: Reimb for meal

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 90921.E19436

Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

209.55

SEE BELOW: REIMB FOR MEAL

**C.**

Full Name (Last, First, Middle Initial)

Sprint

Mailing Address 4501 15th Ave S

City Fargo State ND Zip Code 58103-8956

Purpose of Disbursement  
WOODS - CELL PHONE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 90921.E19442

Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

150.00

**[MEMO ITEM]**

MEMO: WOODS - CELL PHONE

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

412.83

**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)

PAGE 141 / 255

<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)  
Cub Foods - St. Cloud

Mailing Address 1001 4th St SE

City Saint Cloud State MN Zip Code 56304-1297

Purpose of Disbursement  
WOODS - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19449

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.85

**[MEMO ITEM]**

MEMO: WOODS - MEAL

**B.**

Full Name (Last, First, Middle Initial)  
Shopko

Mailing Address 4161 2nd St SE

City Saint Cloud State MN Zip Code 56304-9798

Purpose of Disbursement  
WOODS - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19447

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5.02

**[MEMO ITEM]**

MEMO: WOODS - MEAL

**C.**

Full Name (Last, First, Middle Initial)  
Dominos Pizza - St. Cloud

Mailing Address 1507 1st St S

City Saint Cloud State MN Zip Code 56301-4171

Purpose of Disbursement  
WOODS - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19448

Date of Disbursement

/   /

Amount of Each Disbursement this Period

14.02

**[MEMO ITEM]**

MEMO: WOODS - 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)

PAGE 142 / 255

<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 - St. Cloud

Mailing Address 1507 1st St S

City Saint Cloud State MN Zip Code 56301-4171

Purpose of Disbursement  
WOODS - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 90921.E19437

Date of Disbursement

/   /

Amount of Each Disbursement this Period

17.80

**[MEMO ITEM]**

MEMO: WOODS - MEAL

**B.**

Full Name (Last, First, Middle Initial)  
Dominos Pizza - St. Cloud

Mailing Address 1507 1st St S

City Saint Cloud State MN Zip Code 56301-4171

Purpose of Disbursement  
WOODS - MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 90921.E19441

Date of Disbursement

/   /

Amount of Each Disbursement this Period

11.86

**[MEMO ITEM]**

MEMO: WOODS - MEAL

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey Woods

Mailing Address 14610 Bowers Dr NW

City Anoka State MN Zip Code 55303-7209

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.E19434

Date of Disbursement

/   /

Amount of Each Disbursement this Period

228.62

REIMBURSE FOR MILAGE

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

228.62

**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 143 / 255

<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)  
Jeffrey Woods

Mailing Address 14610 Bowers Dr NW

City Anoka State MN Zip Code 55303-7209

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.E19760

Date of Disbursement

/   /

Amount of Each Disbursement this Period

40.29

SEE BELOW: REIMBURSE FOR MEALS

**B.**

Full Name (Last, First, Middle Initial)  
Dominos Pizza - Sauk Rapids

Mailing Address 202 2nd Ave N

City Sauk Rapids State MN Zip Code 56379-1608

Purpose of Disbursement  
WOODS - REIMBURSE FOR MEAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19761

Date of Disbursement

/   /

Amount of Each Disbursement this Period

40.29

**[MEMO ITEM]**

MEMO: WOODS - REIMBURSE FOR MEAL

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey Woods

Mailing Address 14610 Bowers Dr NW

City Anoka State MN Zip Code 55303-7209

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.E19759

Date of Disbursement

/   /

Amount of Each Disbursement this Period

334.81

REIMBURSE FOR MILAGE

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

375.10

**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 144 / 255

<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.E25833

Date of Disbursement

09 / 18 / 2008

Amount of Each Disbursement this Period

330.46

REIMBURSE FOR MILAGE

**B.**

Full Name (Last, First, Middle Initial)

Andrew Zumbach

Mailing Address 24880 Glen Rd

City Excelsior State MN Zip Code 55331-8546

Purpose of Disbursement

Media Consulting/Non Cand

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19826

Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

1250.00

MEDIA CONSULTING/NON CAND

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

1580.46

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

133778.98



# **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 145 / 255

☐ 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)  
Republican Party Of Minnesota

Mailing Address 525 Park St  
Suite 250

City State Zip Code  
Saint Paul MN 55103-2111

Purpose of Disbursement  
Correct Apr-Dec 07 transfers

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E19972

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 23 2008

Amount of Each Disbursement this Period

75787.31

**B.** Full Name (Last, First, Middle Initial)  
Fifth Congressional Republican District

Mailing Address PO Box 32801

City State Zip Code  
Fridley MN 55432-0801

Purpose of Disbursement  
Transfer to Affiliate-MN 5th Dist

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E20025

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 18 2008

Amount of Each Disbursement this Period

2500.00

**C.** Full Name (Last, First, Middle Initial)  
Fourth Congressional Republican District

Mailing Address 480 Cedar St Ste 580

City State Zip Code  
Saint Paul MN 55101-2217

Purpose of Disbursement  
Transfer to Affiliate

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E21445

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 18 2008

Amount of Each Disbursement this Period

2500.00

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

80787.31

**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 146 / 255

☐ 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)  
Second Congressional Republican District

Mailing Address 101 W Burnsville Pkwy Ste 204  
Suite 204

City Burnsville State MN Zip Code 55337-2572

Purpose of Disbursement  
Transfer to Affiliate

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E20057

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 18 2008

Amount of Each Disbursement this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
Seventh Congressional Republican Dist

Mailing Address PO Box 471

City Marshall State MN Zip Code 56258-0471

Purpose of Disbursement  
Transfer to Affiliate

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E21388

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 25 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Seventh Congressional Republican Dist

Mailing Address PO Box 471

City Marshall State MN Zip Code 56258-0471

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19720

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 18 2008

Amount of Each Disbursement this Period

1500.00

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

5000.00

**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 / 255

<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)

Maine Republican Party

Mailing Address 9 Higgins St

City  
Augusta

State  
ME

Zip Code  
04330-6312

Purpose of Disbursement  
Political Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 90921.E19821

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	0	8

Amount of Each Disbursement this Period

45000.00

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

45000.00

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

130787.31

# **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 148 / 255

<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.E19458

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	8

Amount of Each Disbursement this Period

3251.68

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

3251.68

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

3251.68

# **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 149 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> 90921.E19580 <b>Date of Disbursement</b>
Mailing Address 1210 Northland Dr Ste 100	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55120-1181	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement SEE BELOW: FEA Payroll Taxes	<div>18659.31</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>SEE BELOW: FEA PAYROLL TAXES</b>
<b>B.</b> Full Name (Last, First, Middle Initial) MN State Unemployment	<b>Transaction ID:</b> 90921.E20087 <b>Date of Disbursement</b>
Mailing Address 332 Minnesota St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55101-1314	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement PAYROLL TAXES-FEA	<div>582.92</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>[MEMO ITEM]</b> MEMO: PAYROLL TAXES-FEA
<b>C.</b> Full Name (Last, First, Middle Initial) MN Dept of Revenue	<b>Transaction ID:</b> 90921.E19710 <b>Date of Disbursement</b>
Mailing Address 658 Cedar St Ste 400	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55155-1603	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA PAYROLL TAX	<div>2449.99</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>[MEMO ITEM]</b> MEMO: FEA PAYROLL TAX

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

18659.31

**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 150 / 255

☐ 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)  
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.E25024

Date of Disbursement

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

Amount of Each Disbursement this Period

15626.40

**[MEMO ITEM]**

MEMO: FEA PAYROLL TAXES

**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: Garnishments

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID:** 90921.E19581

Date of Disbursement

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

Amount of Each Disbursement this Period

818.32

SEE BELOW: GARNISHMENTS

**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.E19582

Date of Disbursement

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

Amount of Each Disbursement this Period

745.90

**[MEMO ITEM]**

MEMO: WITHHOLDINGS

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

818.32

**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 151 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Wi Spt Collections Trust Fund Mailing Address PO Box 74400	<b>Transaction ID:</b> 90921.E19583 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City Milwaukee State WI Zip Code 53274-0001 Purpose of Disbursement GARNISHMENTS 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>Amount of Each Disbursement this Period</b> <div>72.42</div> <b>[MEMO ITEM]</b> MEMO: GARNISHMENTS
<b>B.</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 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) ▼	<b>Transaction ID:</b> 90921.E19487 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>48019.77</div> SEE BELOW: FEA SALARY
<b>C.</b> Full Name (Last, First, Middle Initial) Alexander J. Argo Mailing Address 9428 Erin Ct City Woodbury State MN Zip Code 55129- 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) ▼	<b>Transaction ID:</b> 90921.E19488 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>414.45</div> <b>[MEMO ITEM]</b> MEMO: FEA SALARY

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

48019.77

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 152 / 255

<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)

Hayley M. Astrup

Mailing Address 602 24th St NW

City State Zip Code  
Austin MN 55912-Purpose of Disbursement  
FEA SALARY

Candidate Name

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

State: District:

Transaction ID: 90921.E19551

Date of Disbursement

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

Amount of Each Disbursement this Period

792.03

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**

Full Name (Last, First, Middle Initial)

David T Bailey

Mailing Address 980 Stewart Ave

City State Zip Code  
Saint 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.E19489

Date of Disbursement

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

Amount of Each Disbursement this Period

74.53

**[MEMO ITEM]**

MEMO: FEA SALARY

**C.**

Full Name (Last, First, Middle Initial)

Breanna M. Barr

Mailing Address 736 Wilson Ave

City State Zip Code  
Saint Paul MN 55106-5526Purpose of Disbursement  
FEA SALARY

Candidate Name

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

State: District:

Transaction ID: 90921.E19490

Date of Disbursement

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

Amount of Each Disbursement this Period

143.18

**[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)

PAGE 153 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Darren Bearson	<b>Transaction ID:</b> 90921.E19564 <b>Date of Disbursement</b>
Mailing Address 3930 Yellowstone Ln N	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City Plymouth State MN Zip Code 55446-2818	<b>Amount of Each Disbursement this Period</b> <div>2469.03</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:	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>B.</b> Full Name (Last, First, Middle Initial) Rodney Berg	<b>Transaction ID:</b> 90921.E19491
Mailing Address 719 Stewart Ave #2	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55102-	<b>Amount of Each Disbursement this Period</b> <div>231.77</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:	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>C.</b> Full Name (Last, First, Middle Initial) Christe Capistrant	<b>Transaction ID:</b> 90921.E19492
Mailing Address 111 E Kellogg Blvd #2911	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City St Paul State MN Zip Code 55101-	<b>Amount of Each Disbursement this Period</b> <div>266.67</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:	<b>[MEMO ITEM]</b> 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)

PAGE 154 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Ronald Wayne Carey	<b>Transaction ID:</b> 90921.E24513 <b>Date of Disbursement</b>
Mailing Address 2638 146th ave ne	<div> <div>09</div> <div>12</div> <div>2008</div> </div>
City Ham Lake State MN Zip Code 55304-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY Candidate Name	<div>2503.98</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) William B. Carpenter	<b>Transaction ID:</b> 90921.E19493 <b>Date of Disbursement</b>
Mailing Address 1579 H East County Rd D	<div> <div>09</div> <div>12</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55109-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY Candidate Name	<div>618.67</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Joel Cary	<b>Transaction ID:</b> 90921.E19544 <b>Date of Disbursement</b>
Mailing Address 12809 44th PI NE	<div> <div>09</div> <div>12</div> <div>2008</div> </div>
City Saint Michael State MN Zip Code 55376-3030	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY Candidate Name	<div>2096.28</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> 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)

PAGE 155 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Joel P. Chavez	<b>Transaction ID:</b> 90921.E19494 <b>Date of Disbursement</b>
Mailing Address 475 Dayton Ave Apt 1	<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>09 / 12 / 2008</div> </div>
City State Zip Code St Paul MN 55102-	<b>Amount of Each Disbursement this Period</b> <div>697.16</div>
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>B.</b> Full Name (Last, First, Middle Initial) Gina Lynn Countryman	<b>Transaction ID:</b> 90921.E19545 <b>Date of Disbursement</b>
Mailing Address 1282 Deercliff Ln	<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>09 / 12 / 2008</div> </div>
City State Zip Code Eagan MN 55123-1434	<b>Amount of Each Disbursement this Period</b> <div>1554.61</div>
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>C.</b> Full Name (Last, First, Middle Initial) Benjamin Crist	<b>Transaction ID:</b> 90921.E19495 <b>Date of Disbursement</b>
Mailing Address 663 Jefferson 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>09 / 12 / 2008</div> </div>
City State Zip Code Saint Paul MN 55102-3243	<b>Amount of Each Disbursement this Period</b> <div>411.16</div>
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> 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)

PAGE 156 / 255

☐ 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)  
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.E19496

Date of Disbursement

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

Amount of Each Disbursement this Period

821.87

**[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.E24694

Date of Disbursement

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

Amount of Each Disbursement this Period

777.20

**[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.E24723

Date of Disbursement

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

Amount of Each Disbursement this Period

354.72

**[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)

PAGE 157 / 255

☐ 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)

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.E19552

Date of Disbursement

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

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.E19498

Date of Disbursement

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

Amount of Each Disbursement this Period

214.24

**[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.E19553

Date of Disbursement

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

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**

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

FOR LINE NUMBER:  
(check only one)

PAGE 158 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Dorothy Fleming Mailing Address 3101 Wendhurst Ave	<b>Transaction ID:</b> 90921.E19566 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City State Zip Code St Anthony MN 55418-1725 Purpose of Disbursement 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>Amount of Each Disbursement this Period</b> <div>1333.68</div> <b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>B.</b> Full Name (Last, First, Middle Initial) Michael Flodine Mailing Address 1078 Ashland Ave City State Zip Code Saint Paul MN 55104- Purpose of Disbursement 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>Transaction ID:</b> 90921.E19499 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>174.78</div> <b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>C.</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 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>Transaction ID:</b> 90921.E19500 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>716.01</div> <b>[MEMO ITEM]</b> 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)

PAGE 159 / 255

☐ 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)  
Jared Foster

Mailing Address 386 Sterling St S

City State Zip Code  
Maplewood 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.E19501

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 12 / 2008

Amount of Each Disbursement this Period

152.92

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**

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.E19554

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 12 / 2008

Amount of Each Disbursement this Period

819.43

**[MEMO ITEM]**

MEMO: FEA SALARY

**C.**

Full Name (Last, First, Middle Initial)  
Alyssa Gunstrom

Mailing Address 7478 Soth St

City State Zip Code  
Princeton MN 55371-

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.E24778

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 12 / 2008

Amount of Each Disbursement this Period

227.43

**[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 PageFOR LINE NUMBER:  
(check only one)

PAGE 160 / 255

<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

Mailing Address 575 Grand Ave

City State Zip Code  
Saint 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.E19502

Date of Disbursement

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

Amount of Each Disbursement this Period

579.35

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**Full Name (Last, First, Middle Initial)  
Dallas J. HansenMailing Address 11210 Partridge St  
DhCity State Zip Code  
Coon Rapids MN 55433-Purpose of Disbursement  
FEA SALARY

Candidate Name

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

State: District:

Transaction ID: 90921.E19503

Date of Disbursement

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

Amount of Each Disbursement this Period

509.49

**[MEMO ITEM]**

MEMO: FEA SALARY

**C.**Full Name (Last, First, Middle Initial)  
Sarah Hansen-Jones

Mailing Address 505 Hoyt Ave E

City State Zip Code  
Saint 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.E19504

Date of Disbursement

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

Amount of Each Disbursement this Period

574.28

**[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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 161 / 255

☐ 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)  
Dana Harding

Mailing Address 1038 Front Ave

City State Zip Code  
Saint Paul MN 55103-1224

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.E19505

Date of Disbursement

/   /

Amount of Each Disbursement this Period

312.64

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**

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

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

State: District:

**Transaction ID:** 90921.E19506

Date of Disbursement

/   /

Amount of Each Disbursement this Period

559.75

**[MEMO ITEM]**

MEMO: FEA SALARY

**C.**

Full Name (Last, First, Middle Initial)  
Kimberly A. Heifort

Mailing Address 763 Lawson Ave

City State Zip Code  
Saint 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.E19507

Date of Disbursement

/   /

Amount of Each Disbursement this Period

82.95

**[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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 162 / 255

☐ 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)  
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.E22766

Date of Disbursement

/   /

Amount of Each Disbursement this Period

95.77

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**

Full Name (Last, First, Middle Initial)  
Michele N. Honaker

Mailing Address 680 Stewart Ave

City Saint Paul State MN Zip Code 55102-4117

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.E19573

Date of Disbursement

/   /

Amount of Each Disbursement this Period

267.96

**[MEMO ITEM]**

MEMO: FEA SALARY

**C.**

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.E19510

Date of Disbursement

/   /

Amount of Each Disbursement this Period

133.29

**[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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 163 / 255

☐ 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)  
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.E19511

Date of Disbursement

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

Amount of Each Disbursement this Period

1360.97

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**

Full Name (Last, First, Middle Initial)  
Bryan Humphreys

Mailing Address 605 Harriet Ave Apt 607

City State Zip Code  
Saint Paul MN 55126-

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.E19556

Date of Disbursement

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

Amount of Each Disbursement this Period

1592.57

**[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.E19514

Date of Disbursement

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

Amount of Each Disbursement this Period

412.95

**[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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 164 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Kathleen Hupalo	<b>Transaction ID:</b> 90921.E19515 <b>Date of Disbursement</b>
Mailing Address 684 Delaware Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City St Paul State MN Zip Code 55107-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY	<div>177.54</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>B.</b> Full Name (Last, First, Middle Initial) Dustin Johnson	<b>Transaction ID:</b> 90921.E19516 <b>Date of Disbursement</b>
Mailing Address 9556 79th St S	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City Cottage Grove State MN Zip Code 55016-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY	<div>194.89</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>C.</b> Full Name (Last, First, Middle Initial) Matthew Kirkpatrick	<b>Transaction ID:</b> 90921.E19557 <b>Date of Disbursement</b>
Mailing Address 3900 Valley View Dr N # 303 #303	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55122-1554	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY	<div>1000.79</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> 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)

PAGE 165 / 255

☐ 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 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.E19517

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 12 / 2008

Amount of Each Disbursement this Period

513.08

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**

Full Name (Last, First, Middle Initial)

Nicholas Leonetti

Mailing Address 968 Lawson Ave. E.

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.E19518

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 12 / 2008

Amount of Each Disbursement this Period

381.37

**[MEMO ITEM]**

MEMO: FEA SALARY

**C.**

Full Name (Last, First, Middle Initial)

Brian R. Longenhagen

Mailing Address 729 Tuscarora Ave

City State Zip Code  
Saint Paul MN 55102-3905

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.E19574

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 12 / 2008

Amount of Each Disbursement this Period

351.74

**[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**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 166 / 255

<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)  
Nicholas Lynch

Mailing Address 2245 Ariel St N

City State Zip Code  
Saint Paul MN 55109-2855Purpose of Disbursement  
FEA SALARY

Candidate Name

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

State: District:

Transaction ID: 90921.E19519

Date of Disbursement

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

Amount of Each Disbursement this Period

165.85

**[MEMO ITEM]**

MEMO: FEA SALARY

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

State: District:

Transaction ID: 90921.E26399

Date of Disbursement

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

Amount of Each Disbursement this Period

432.98

**[MEMO ITEM]**

MEMO: FEA SALARY

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

Mailing Address 7 Stanley Keyes Ct

City State Zip Code  
Rye NY 10580-3260Purpose of Disbursement  
FEA SALARY

Candidate Name

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

State: District:

Transaction ID: 90921.E19522

Date of Disbursement

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

Amount of Each Disbursement this Period

282.03

**[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 PageFOR LINE NUMBER:  
(check only one)

PAGE 167 / 255

<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

Mailing Address 7338 Jewel Ave S

City  
Cottage GroveState  
MNZip 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.E19521

Date of Disbursement

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

Amount of Each Disbursement this Period

545.14

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**

Full Name (Last, First, Middle Initial)

John T. Meyer

Mailing Address 1425 Jessamine Ave W  
Apt. 110City  
Saint PaulState  
MNZip 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.E19558

Date of Disbursement

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

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  
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.E19523

Date of Disbursement

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

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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 168 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Adam Mohler	<b>Transaction ID:</b> 90921.E19524 <b>Date of Disbursement</b>
Mailing Address 3924 Cedar Grove Pkwy Apt 207	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 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>953.80</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) ▼ <b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>B.</b> Full Name (Last, First, Middle Initial) Cheryle Lee Montgomery	<b>Transaction ID:</b> 90921.E19525 <b>Date of Disbursement</b>
Mailing Address Po Box 65231	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 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>606.82</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>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>C.</b> Full Name (Last, First, Middle Initial) Sweety Moua	<b>Transaction ID:</b> 90921.E19526 <b>Date of Disbursement</b>
Mailing Address 710 Charles Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55104-	Amount of Each Disbursement this Period
Purpose of Disbursement FEA SALARY	<div>152.86</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>[MEMO ITEM]</b> 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)

PAGE 169 / 255

<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)

Martha Nichols

Mailing Address 2124 Bates Ave.  
H4City 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.E19527

Date of Disbursement

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

Amount of Each Disbursement this Period

217.25

**[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 55119-6653Purpose of Disbursement  
FEA SALARY

Candidate Name

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

State: District:

Transaction ID: 90921.E22844

Date of Disbursement

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

Amount of Each Disbursement this Period

1614.84

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

State: District:

Transaction ID: 90921.E19528

Date of Disbursement

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

Amount of Each Disbursement this Period

1182.02

**[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)

PAGE 170 / 255

<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 PizzellaMailing Address 680 Stewart Ave  
LpCity 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.E19529

Date of Disbursement

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

Amount of Each Disbursement this Period

464.86

**[MEMO ITEM]**

MEMO: FEA SALARY

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

Mailing Address 1002 Drew Drive

City State Zip Code  
Saint Paul 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.E19559

Date of Disbursement

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

Amount of Each Disbursement this Period

902.50

**[MEMO ITEM]**

MEMO: FEA SALARY

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

Mailing Address 680 Stewart Ave

City State Zip Code  
Saint 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.E19530

Date of Disbursement

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

Amount of Each Disbursement this Period

552.30

**[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 PageFOR LINE NUMBER:  
(check only one)

PAGE 171 / 255

<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Joshua Revak	Transaction ID: 90921.E19560 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 8
	Mailing Address 74732 240th St	
	City Dassel State MN Zip Code 55325-3451	Amount of Each Disbursement this Period 1278.68
	Purpose of Disbursement FEA SALARY	[MEMO ITEM] MEMO: 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) ▼	
	State: District:	
<b>B.</b>	Full Name (Last, First, Middle Initial) Dena Roby	Transaction ID: 90921.E19531 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 8
	Mailing Address 1577 Jessamine Ln B	
	City St Paul State MN Zip Code 55106-	Amount of Each Disbursement this Period 195.78
	Purpose of Disbursement FEA SALARY	[MEMO ITEM] MEMO: 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) ▼	
	State: District:	
<b>C.</b>	Full Name (Last, First, Middle Initial) Julia Ruetten	Transaction ID: 90921.E19561 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 8
	Mailing Address 1342 Coach St Apt 122	
	City Saint Paul State MN Zip Code 55108-5296	Amount of Each Disbursement this Period 809.10
	Purpose of Disbursement FEA SALARY	[MEMO ITEM] MEMO: 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) ▼	
	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)

PAGE 172 / 255

☐ 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)

David Rupprecht

Mailing Address 1550 Edgerton St  
Apt 303

City State Zip Code  
St Paul MN 55105-

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.E19532

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 12 2008

Amount of Each Disbursement this Period

171.74

**[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 55331-1770

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.E19543

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 12 2008

Amount of Each Disbursement this Period

69.26

**[MEMO ITEM]**

MEMO: FEA SALARY

**C.**

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.E19533

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 12 2008

Amount of Each Disbursement this Period

518.84

**[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**

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

FOR LINE NUMBER:  
(check only one)

PAGE 173 / 255

☐ 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)  
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.E19534

Date of Disbursement

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

Amount of Each Disbursement this Period

332.28

**[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/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19535

Date of Disbursement

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

Amount of Each Disbursement this Period

378.17

**[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 55104-2718

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.E19536

Date of Disbursement

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

Amount of Each Disbursement this Period

276.72

**[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)

PAGE 174 / 255

☐ 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)  
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.E19546

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 12 / 2008

Amount of Each Disbursement this Period

248.09

**[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.E19537

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 12 / 2008

Amount of Each Disbursement this Period

1117.09

**[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.E19550

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 12 / 2008

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  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 175 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Detra Turner	<b>Transaction ID:</b> 90921.E19538 <b>Date of Disbursement</b>
Mailing Address 922 Wescott Trail #202	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55123-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY Candidate Name	<div>108.87</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Joyce Walker	<b>Transaction ID:</b> 90921.E19539 <b>Date of Disbursement</b>
Mailing Address 445 View St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55102-3426	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY Candidate Name	<div>269.72</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Timothy Welsh	<b>Transaction ID:</b> 90921.E19540 <b>Date of Disbursement</b>
Mailing Address 680 Stewart Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55102-4117	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY Candidate Name	<div>334.80</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> 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)

PAGE 176 / 255

☐ 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)  
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.E19572

Date of Disbursement

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

Amount of Each Disbursement this Period

155.00

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**

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.E19562

Date of Disbursement

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

Amount of Each Disbursement this Period

639.21

**[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.E19563

Date of Disbursement

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

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**

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

FOR LINE NUMBER:  
(check only one)

PAGE 177 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Michael A. Wright	<b>Transaction ID:</b> 90921.E19541 <b>Date of Disbursement</b>
Mailing Address 2477 Indian Way	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City State Zip Code St Paul MN 55109-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY	<div>269.40</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>B.</b> Full Name (Last, First, Middle Initial) Shane Wyman	<b>Transaction ID:</b> 90921.E25831 <b>Date of Disbursement</b>
Mailing Address 9124 Tyler St NE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 2 / 2 0 0 8</div> </div>
City State Zip Code Minneapolis MN 55434-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA Salary	<div>821.60</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>C.</b> Full Name (Last, First, Middle Initial) Paychex	<b>Transaction ID:</b> 90921.E19713 <b>Date of Disbursement</b>
Mailing Address 1210 Northland Dr Ste 100	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City State Zip Code Saint Paul MN 55120-1181	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement SEE BELOW: Garnishments	<div>1135.16</div>
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) .....

1135.16

**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)

PAGE 178 / 255

<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

<b>A.</b> Full Name (Last, First, Middle Initial) MN Dept of Revenue Mailing Address 658 Cedar St Ste 400	<b>Transaction ID:</b> 90921.E20089 <b>Date of Disbursement</b> <div> <div>09</div> <div>26</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55155-1603 Purpose of Disbursement GARNISHMENT-FEA MN DEPT OF 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>Amount of Each Disbursement this Period</b> <div>255.67</div> <b>[MEMO ITEM]</b> MEMO: GARNISHMENT-FEA MN DEPT OF
<b>B.</b> Full Name (Last, First, Middle Initial) Osi Education Services, Inc. Mailing Address PO Box 929 City Brookfield State WI Zip Code 53008-0929 Purpose of Disbursement GARNISHMENT-OSI EDUCATION 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>Transaction ID:</b> 90921.E19715 <b>Date of Disbursement</b> <div> <div>09</div> <div>26</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>73.59</div> <b>[MEMO ITEM]</b> MEMO: GARNISHMENT-OSI EDUCATION
<b>C.</b> Full Name (Last, First, Middle Initial) MN Child Support Center Mailing Address PO Box 64306 City Saint Paul State MN Zip Code 55164-0306 Purpose of Disbursement WITHHOLDINGS 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>Transaction ID:</b> 90921.E19714 <b>Date of Disbursement</b> <div> <div>09</div> <div>26</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>745.90</div> <b>[MEMO ITEM]</b> 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)

PAGE 179 / 255

☐ 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)  
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.E19716

Date of Disbursement

0 9  2 6  2 0 0 8

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 Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19675

Date of Disbursement

0 9  2 6  2 0 0 8

Amount of Each Disbursement this Period

51457.51

SEE BELOW: FEA SALARY

**C.**

Full Name (Last, First, Middle Initial)  
Alexander J. Argo

Mailing Address 9428 Erin Ct

City Woodbury State MN Zip Code 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.E19591

Date of Disbursement

0 9  2 6  2 0 0 8

Amount of Each Disbursement this Period

364.33

**[MEMO ITEM]**

MEMO: FEA SALARY

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

51457.51

**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 180 / 255

☐ 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)

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.E19653

Date of Disbursement

/   /

Amount of Each Disbursement this Period

792.03

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**

Full Name (Last, First, Middle Initial)

Breanna M. Barr

Mailing Address 736 Wilson Ave

City State Zip Code  
Saint Paul MN 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.E19594

Date of Disbursement

/   /

Amount of Each Disbursement this Period

292.26

**[MEMO ITEM]**

MEMO: FEA SALARY

**C.**

Full Name (Last, First, Middle Initial)

Darren Bearson

Mailing Address 3930 Yellowstone Ln N

City State Zip Code  
Plymouth MN 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.E19666

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2469.03

**[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

FOR LINE NUMBER:  
(check only one)

PAGE 181 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Christe Capistrant	<b>Transaction ID:</b> 90921.E19598 <b>Date of Disbursement</b>
Mailing Address 111 E Kellogg Blvd #2911	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City State Zip Code St Paul MN 55101-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>463.44</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>B.</b> Full Name (Last, First, Middle Initial) Ronald Wayne Carey	<b>Transaction ID:</b> 90921.E24556 <b>Date of Disbursement</b>
Mailing Address 2638 146th ave ne	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City State Zip Code Ham Lake MN 55304-	<b>Amount of Each Disbursement this Period</b>
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) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) William B. Carpenter	<b>Transaction ID:</b> 90921.E19599 <b>Date of Disbursement</b>
Mailing Address 1579 H East County Rd D	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City State Zip Code Saint Paul MN 55109-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>610.34</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)

PAGE 182 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Joel Cary Mailing Address 12809 44th PI NE	<b>Transaction ID:</b> 90921.E19647 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City State Zip Code Saint Michael MN 55376-3030 Purpose of Disbursement 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>Amount of Each Disbursement this Period</b> <div>2096.28</div> <b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>B.</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 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>Transaction ID:</b> 90921.E19600 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>590.69</div> <b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>C.</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 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>Transaction ID:</b> 90921.E19681 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>203.95</div> <b>[MEMO ITEM]</b> 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)

PAGE 183 / 255

☐ 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)  
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.E19648

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1554.61

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**

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.E19601

Date of Disbursement

/   /

Amount of Each Disbursement this Period

339.84

**[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.E19602

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1037.58

**[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)

PAGE 184 / 255

<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

Mailing Address 1395 Farrington St Apt A

City State Zip Code  
Saint Paul MN 55117-Purpose of Disbursement  
FEA SALARY

Candidate Name

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

State: District:

Transaction ID: 90921.E24707

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	8

Amount of Each Disbursement this Period

527.25

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

State: District:

Transaction ID: 90921.E24738

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	8

Amount of Each Disbursement this Period

354.72

**[MEMO ITEM]**

MEMO: FEA SALARY

**C.**

Full Name (Last, First, Middle Initial)

Megan Ehrreich

Mailing Address 1088 Lovell Ave W

City State Zip Code  
Roseville MN 55113-4419Purpose of Disbursement  
FEA SALARY

Candidate Name

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

State: District:

Transaction ID: 90921.E25847

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	8

Amount of Each Disbursement this Period

115.07

**[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**

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

FOR LINE NUMBER:  
(check only one)

PAGE 185 / 255

☐ 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  
FEA SALARY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19670

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 26 2008

Amount of Each Disbursement this Period

779.58

**[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.E23468

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 26 2008

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.E19604

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 26 2008

Amount of Each Disbursement this Period

410.33

**[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)

PAGE 186 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Lucas Fischer	<b>Transaction ID:</b> 90921.E19655 <b>Date of Disbursement</b>
Mailing Address 2118 130th Ave NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City State Zip Code Minneapolis MN 55448- Purpose of Disbursement FEA SALARY Candidate Name	Amount of Each Disbursement this Period <div>809.10</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> <b>[MEMO ITEM]</b>            MEMO: FEA SALARY         </div>
<b>B.</b> Full Name (Last, First, Middle Initial) Dorothy Fleming	<b>Transaction ID:</b> 90921.E19668 <b>Date of Disbursement</b>
Mailing Address 3101 Wendhurst Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City State Zip Code St Anthony MN 55418-1725 Purpose of Disbursement FEA SALARY Candidate Name	Amount of Each Disbursement this Period <div>1333.68</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> <b>[MEMO ITEM]</b>            MEMO: FEA SALARY         </div>
<b>C.</b> Full Name (Last, First, Middle Initial) Raymond C. Forrest	<b>Transaction ID:</b> 90921.E19605 <b>Date of Disbursement</b>
Mailing Address 680 Stewart Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 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>665.04</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> <b>[MEMO ITEM]</b>            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  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 187 / 255

☐ 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Karen Franze	<b>Transaction ID:</b> 90921.E19656 <b>Date of Disbursement</b>
	Mailing Address 100 1st. Street Se P.o. Box 829	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
	City Pelican Rapids State MN Zip Code 56572-	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA SALARY Candidate Name	<div>819.43</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>	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>B.</b>	Full Name (Last, First, Middle Initial) Alyssa Gunstrom	<b>Transaction ID:</b> 90921.E24777 <b>Date of Disbursement</b>
	Mailing Address 7478 Soth St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
	City Princeton State MN Zip Code 55371-	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA SALARY Candidate Name	<div>227.43</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>	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>C.</b>	Full Name (Last, First, Middle Initial) Christopher J. Halonen	<b>Transaction ID:</b> 90921.E19671 <b>Date of Disbursement</b>
	Mailing Address 680 Stewart Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 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>148.41</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>	<b>[MEMO ITEM]</b> 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)

PAGE 188 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Daniel Hanover	<b>Transaction ID:</b> 90921.E19606 <b>Date of Disbursement</b>
Mailing Address 575 Grand Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55102-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY	<div>635.67</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>B.</b> Full Name (Last, First, Middle Initial) Dallas J. Hansen	<b>Transaction ID:</b> 90921.E19607 <b>Date of Disbursement</b>
Mailing Address 11210 Partridge St Dh	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City Coon Rapids State MN Zip Code 55433-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY	<div>434.96</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>C.</b> Full Name (Last, First, Middle Initial) Sarah Hansen-Jones	<b>Transaction ID:</b> 90921.E19608 <b>Date of Disbursement</b>
Mailing Address 505 Hoyt Ave E	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55106-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY	<div>613.45</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> 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)

PAGE 189 / 255

☐ 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)  
Dana Harding

Mailing Address 1038 Front Ave

City State Zip Code  
Saint Paul MN 55103-1224

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.E19609

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 2 6 / 2 0 0 8

Amount of Each Disbursement this Period

400.80

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**

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

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

State: District:

Transaction ID: 90921.E19610

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 2 6 / 2 0 0 8

Amount of Each Disbursement this Period

549.89

**[MEMO ITEM]**

MEMO: FEA SALARY

**C.**

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

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

State: District:

Transaction ID: 90921.E24808

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 2 6 / 2 0 0 8

Amount of Each Disbursement this Period

470.56

**[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)

PAGE 190 / 255

<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 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.E19672

Date of Disbursement

M M / D D / Y Y Y Y  
0 9 / 2 6 / 2 0 0 8

Amount of Each Disbursement this Period

38.39

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**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.E22761

Date of Disbursement

M M / D D / Y Y Y Y  
0 9 / 2 6 / 2 0 0 8

Amount of Each Disbursement this Period

114.32

**[MEMO ITEM]**

MEMO: FEA SALARY

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

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.E19613

Date of Disbursement

M M / D D / Y Y Y Y  
0 9 / 2 6 / 2 0 0 8

Amount of Each Disbursement this Period

150.76

**[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)

PAGE 191 / 255

<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)

Caitlin B. Houlton

Mailing Address 1185 Main St NW

City State Zip Code  
Elk River MN 55330-1802Purpose of Disbursement  
FEA SALARY

Candidate Name

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

State: District:

Transaction ID: 90921.E19614

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	8

Amount of Each Disbursement this Period

252.24

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**

Full Name (Last, First, Middle Initial)

Ronald Huettl

Mailing Address 70 Virginia St  
#1City State Zip Code  
St Paul MN 55107-Purpose of Disbursement  
FEA SALARY

Candidate Name

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

State: District:

Transaction ID: 90921.E19615

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	8

Amount of Each Disbursement this Period

1360.97

**[MEMO ITEM]**

MEMO: FEA SALARY

**C.**

Full Name (Last, First, Middle Initial)

Bryan Humphreys

Mailing Address 605 Harriet Ave Apt 607

City State Zip Code  
Saint Paul MN 55126-Purpose of Disbursement  
FEA SALARY

Candidate Name

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

State: District:

Transaction ID: 90921.E19658

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	8

Amount of Each Disbursement this Period

1592.57

**[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)

PAGE 192 / 255

☐ 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)

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.E19616

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 2 6 / 2 0 0 8

Amount of Each Disbursement this Period

168.90

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**

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.E19617

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 2 6 / 2 0 0 8

Amount of Each Disbursement this Period

455.67

**[MEMO ITEM]**

MEMO: FEA SALARY

**C.**

Full Name (Last, First, Middle Initial)

Dustin Johnson

Mailing Address 9556 79th St 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.E19618

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 2 6 / 2 0 0 8

Amount of Each Disbursement this Period

116.96

**[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)

PAGE 193 / 255

☐ 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)

Jason J. Kellar

Mailing Address 12125 Saint Croix Trl S

City  
Hastings

State  
MN

Zip Code  
55033-9167

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.E19673

Date of Disbursement

/   /

Amount of Each Disbursement this Period

254.36

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**

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.E19659

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.79

**[MEMO ITEM]**

MEMO: FEA SALARY

**C.**

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.E19674

Date of Disbursement

/   /

Amount of Each Disbursement this Period

836.50

**[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)

PAGE 194 / 255

<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)

Michael T. Laehn

Mailing Address 4140 Columbus Ave Apt 2

City State Zip Code  
Minneapolis MN 55407-5082Purpose of Disbursement  
FEA SALARY

Candidate Name

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

State: District:

Transaction ID: 90921.E19619

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	8

Amount of Each Disbursement this Period

455.09

[MEMO ITEM]

MEMO: FEA SALARY

B.

Full Name (Last, First, Middle Initial)

Nicholas Leonetti

Mailing Address 968 Lawson Ave. E.

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.E19620

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	8

Amount of Each Disbursement this Period

446.67

[MEMO ITEM]

MEMO: FEA SALARY

C.

Full Name (Last, First, Middle Initial)

Brian R. Longenhagen

Mailing Address 729 Tuscarora Ave

City State Zip Code  
Saint Paul MN 55102-3905Purpose of Disbursement  
FEA SALARY

Candidate Name

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

State: District:

Transaction ID: 90921.E19621

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	8

Amount of Each Disbursement this Period

341.67

[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)

PAGE 195 / 255

☐ 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)  
Nicholas Lynch

Mailing Address 2245 Ariel St N

City State Zip Code  
Saint Paul MN 55109-2855

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.E19622

Date of Disbursement

/   /

Amount of Each Disbursement this Period

86.47

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**

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

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

State: District:

Transaction ID: 90921.E26336

Date of Disbursement

/   /

Amount of Each Disbursement this Period

276.81

**[MEMO ITEM]**

MEMO: FEA SALARY

**C.**

Full Name (Last, First, Middle Initial)  
Georgina H. McNiff

Mailing Address 7 Stanley Keyes Ct

City State Zip Code  
Rye NY 10580-3260

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.E19625

Date of Disbursement

/   /

Amount of Each Disbursement this Period

290.34

**[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)

PAGE 196 / 255

☐ 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)  
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.E19624

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 2 6 / 2 0 0 8

Amount of Each Disbursement this Period

556.06

**[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.E19660

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 2 6 / 2 0 0 8

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.E19626

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 2 6 / 2 0 0 8

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)

PAGE 197 / 255

<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Adam Mohler	Transaction ID: 90921.E19627 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 8
	Mailing Address 3924 Cedar Grove Pkwy Apt 207	
	City Eagan State MN Zip Code 55122-	Amount of Each Disbursement this Period 969.39
	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) ▼	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
	State: District:	
<b>B.</b>	Full Name (Last, First, Middle Initial) Cheryle Lee Montgomery	Transaction ID: 90921.E19628 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 8
	Mailing Address Po Box 65231	
	City Saint Paul State MN Zip Code 55165-	Amount of Each Disbursement this Period 550.42
	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) ▼	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
	State: District:	
<b>C.</b>	Full Name (Last, First, Middle Initial) David E. Mowen	Transaction ID: 90921.E19678 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 8
	Mailing Address 2651 Oliver Ave N	
	City Minneapolis State MN Zip Code 55411-1846	Amount of Each Disbursement this Period 38.65
	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) ▼	<b>[MEMO ITEM]</b> 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**

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

FOR LINE NUMBER:  
(check only one)

PAGE 198 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Martha Nichols	<b>Transaction ID:</b> 90921.E19629 <b>Date of Disbursement</b>
Mailing Address 2124 Bates Ave. H4	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City State Zip Code St. Paul MN 55106-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>318.55</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>B.</b> Full Name (Last, First, Middle Initial) Angela Nielsen	<b>Transaction ID:</b> 90921.E22867 <b>Date of Disbursement</b>
Mailing Address 123M McKnight Rd N	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City State Zip Code Saint Paul MN 55119-6653	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>1614.84</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>C.</b> Full Name (Last, First, Middle Initial) Sarah J. Noll	<b>Transaction ID:</b> 90921.E19679 <b>Date of Disbursement</b>
Mailing Address 2130 Ivy Dr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City State Zip Code Manhattan KS 66502-4519	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY Candidate Name	<div> <div>37.04</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)

PAGE 199 / 255

<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)  
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.E19630

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 26 2008

Amount of Each Disbursement this Period

1185.74

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**

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.E19683

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 26 2008

Amount of Each Disbursement this Period

200.14

**[MEMO ITEM]**

MEMO: FEA SALARY

**C.**

Full Name (Last, First, Middle Initial)  
Lori-Anne Pizzella

Mailing Address 680 Stewart Ave  
Lp

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.E19631

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 26 2008

Amount of Each Disbursement this Period

664.34

**[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)

PAGE 200 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Anthony Post	<b>Transaction ID:</b> 90921.E19661 <b>Date of Disbursement</b>
Mailing Address 1002 Drew Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55124-	<b>Amount of Each Disbursement this Period</b>
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:	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>B.</b> Full Name (Last, First, Middle Initial) Carlos J Ramirez	<b>Transaction ID:</b> 90921.E19632 <b>Date of Disbursement</b>
Mailing Address 680 Stewart Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55102-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA SALARY	<div>676.70</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>C.</b> Full Name (Last, First, Middle Initial) Joshua Revak	<b>Transaction ID:</b> 90921.E19662 <b>Date of Disbursement</b>
Mailing Address 74732 240th St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City Dassel State MN Zip Code 55325-3451	<b>Amount of Each Disbursement this Period</b>
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:	<b>[MEMO ITEM]</b> 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)

PAGE 201 / 255

☐ 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)  
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/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19633

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 2 6 / 2 0 0 8

Amount of Each Disbursement this Period

357.02

**[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/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19634

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 2 6 / 2 0 0 8

Amount of Each Disbursement this Period

105.83

**[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 55108-5296

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.E19663

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 2 6 / 2 0 0 8

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**

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

FOR LINE NUMBER:  
(check only one)

PAGE 202 / 255

☐ 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)

David Rupprecht

Mailing Address 1550 Edgerton St  
Apt 303

City State Zip Code  
St Paul MN 55105-

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.E19635

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 26 2008

Amount of Each Disbursement this Period

43.85

**[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 55331-1770

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.E19646

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 26 2008

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  
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.E19636

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 26 2008

Amount of Each Disbursement this Period

324.45

**[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)

PAGE 203 / 255

☐ 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)  
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.E19637

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 2 6 / 2 0 0 8

Amount of Each Disbursement this Period

302.02

**[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/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 90921.E19638

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 2 6 / 2 0 0 8

Amount of Each Disbursement this Period

402.02

**[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 55104-2718

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.E19639

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 2 6 / 2 0 0 8

Amount of Each Disbursement this Period

196.13

**[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)

PAGE 204 / 255

☐ 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)  
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.E19649

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 26 2008

Amount of Each Disbursement this Period

248.09

**[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.E19640

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 26 2008

Amount of Each Disbursement this Period

1101.85

**[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.E19652

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 26 2008

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  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 205 / 255

☐ 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)  
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.E19677

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 26 / 2008

Amount of Each Disbursement this Period

407.86

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**

Full Name (Last, First, Middle Initial)  
Detra Turner

Mailing Address 922 Wescott Trail  
#202

City State Zip Code  
Saint Paul MN 55123-

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.E19641

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 26 / 2008

Amount of Each Disbursement this Period

183.11

**[MEMO ITEM]**

MEMO: FEA SALARY

**C.**

Full Name (Last, First, Middle Initial)  
Joyce Walker

Mailing Address 445 View St

City State Zip Code  
Saint Paul MN 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.E19642

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 / 26 / 2008

Amount of Each Disbursement this Period

324.39

**[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)

PAGE 206 / 255

☐ 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)  
Timothy Welsh

Mailing Address 680 Stewart Ave

City State Zip Code  
Saint Paul MN 55102-4117

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.E19643

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 26 2008

Amount of Each Disbursement this Period

276.25

**[MEMO ITEM]**

MEMO: FEA SALARY

**B.**

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.E19664

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 26 2008

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 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.E19669

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 26 2008

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 207 / 255

☐ 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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeffrey Woods	<b>Transaction ID:</b> 90921.E19665 Date of Disbursement
	Mailing Address 14610 Bowers Dr NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
	City Anoka State MN Zip Code 55303-7209	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement FEA SALARY</div> <div>Candidate Name</div> </div> <div> <div>Category/ Type</div> </div>	<div>866.27</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>	<p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<b>B.</b>	Full Name (Last, First, Middle Initial) Michael A. Wright	<b>Transaction ID:</b> 90921.E19644 Date of Disbursement
	Mailing Address 2477 Indian Way	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
	City St Paul State MN Zip Code 55109-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement FEA SALARY</div> <div>Candidate Name</div> </div> <div> <div>Category/ Type</div> </div>	<div>457.11</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>	<p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</p>
<b>C.</b>	Full Name (Last, First, Middle Initial) Shane Wyman	<b>Transaction ID:</b> 90921.E25832 Date of Disbursement
	Mailing Address 9124 Tyler St NE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
	City Minneapolis State MN Zip Code 55434-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement FEA Salary</div> <div>Candidate Name</div> </div> <div> <div>Category/ Type</div> </div>	<div>821.60</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>	<p><b>[MEMO ITEM]</b> MEMO: FEA SALARY</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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 208 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Venus Yang Mailing Address 10807 Maple Blvd	<b>Transaction ID:</b> 90921.E19680 <b>Date of Disbursement</b> <div> <div>09</div> <div>26</div> <div>2008</div> </div>
City Saint Paul State MN Zip Code 55129-8322 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) ▼	<b>Amount of Each Disbursement this Period</b> <div>141.95</div> <b>[MEMO ITEM]</b> MEMO: FEA SALARY
<b>B.</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 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>Transaction ID:</b> 90921.E19692 <b>Date of Disbursement</b> <div> <div>09</div> <div>26</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>19846.34</div> SEE BELOW: FEA PAYROLL TAXES
<b>C.</b> 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 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>Transaction ID:</b> 90921.E20088 <b>Date of Disbursement</b> <div> <div>09</div> <div>26</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>606.21</div> <b>[MEMO ITEM]</b> MEMO: PAYROLL TAXES-FEA

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

19846.34

**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)

PAGE 209 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) MN Dept of Revenue	<b>Transaction ID:</b> 90921.E19712 <b>Date of Disbursement</b>
Mailing Address 658 Cedar St Ste 400	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55155-1603	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA PAYROLL TAX Candidate Name	<div>2586.58</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <b>[MEMO ITEM]</b>            MEMO: FEA PAYROLL TAX         </div>
<b>B.</b> Full Name (Last, First, Middle Initial) Internal Revenue Service	<b>Transaction ID:</b> 90921.E25046 <b>Date of Disbursement</b>
Mailing Address P.O. BOX 43251	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 8</div> </div>
City Ogden State UT Zip Code 84201-0001	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA PAYROLL TAXES Candidate Name	<div>16653.55</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> <b>[MEMO ITEM]</b>            MEMO: FEA PAYROLL TAXES         </div>
<b>C.</b> Full Name (Last, First, Middle Initial) RJF Agencies	<b>Transaction ID:</b> 90921.E19974 <b>Date of Disbursement</b>
Mailing Address 6000 Nathan Ln N Ste 400	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 0 8</div> </div>
City Minneapolis State MN Zip Code 55442-1691	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Workers Comp. Insurance Candidate Name	<div>603.15</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div>           WORKERS COMP. INSURANCE         </div>

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

603.15

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 210 / 255

<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

<b>A.</b>		<b>Transaction ID:</b> 90921.E20086 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 8	
Full Name (Last, First, Middle Initial) Response America Llc		Amount of Each Disbursement this Period 102845.98	
Mailing Address 2800 S Shirlington Rd Ste 901 Suite 901			
City Arlington	State VA	Zip Code 22206-3619	
Purpose of Disbursement Absentee Ballot Mail-Generic		<input type="text"/>	
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) ▼		
State: District:			
<b>B.</b>		<b>Transaction ID:</b> 90921.E19976 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 8	
Full Name (Last, First, Middle Initial) Alliance Bank		Amount of Each Disbursement this Period 240.00	
Mailing Address 444 Cedar St			
City Saint Paul	State MN	Zip Code 55101-2179	
Purpose of Disbursement Employee FEA HSA Contribution		<input type="text"/>	
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) ▼		
State: District:			
<b>C.</b>		<b>Transaction ID:</b> 90921.E19975 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 8	
Full Name (Last, First, Middle Initial) Alliance Bank		Amount of Each Disbursement this Period 1280.00	
Mailing Address 444 Cedar St			
City Saint Paul	State MN	Zip Code 55101-2179	
Purpose of Disbursement Employer FEA HSA Contribution		<input type="text"/>	
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) ▼		
State: District:			

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

104365.98

**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 211 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Alliance Bank Mailing Address 444 Cedar St	<b>Transaction ID:</b> 90921.E19984 <b>Date of Disbursement</b> <div> <div>09</div> <div>29</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>366.14</div> EMPLOYEE FEA HSA CONTRIBU- TION
<b>B.</b> Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Minnesota Mailing Address P.o. Box 64338 City St. Paul State MN Zip Code 55164-0179 Purpose of Disbursement FEA Employees Health Insurance 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>Transaction ID:</b> 90921.E19822 <b>Date of Disbursement</b> <div> <div>09</div> <div>25</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>6984.00</div> FEA EMPLOYEES HEALTH INSU- RANCE
<b>C.</b> 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 Payroll Adjustment 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>Transaction ID:</b> 90921.E19726 <b>Date of Disbursement</b> <div> <div>09</div> <div>15</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>111.05</div> PAYROLL ADJUSTMENT

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

**7461.19**

**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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 212 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) FLS Connect	<b>Transaction ID:</b> 90921.E19275 <b>Date of Disbursement</b>
Mailing Address 7300 Hudson Blvd N Ste 270	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div>
City State Zip Code Saint Paul MN 55128-7143 Purpose of Disbursement Party telemarketing/fundraising Candidate Name	Amount of Each Disbursement this Period <div>29582.35</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State: District:</div> </div> <div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General</div> <div><input type="checkbox"/> Other (specify) ▼</div> </div>	<div> <div>Category/Type</div> <div>PARTY TELEMARKETING/FUNDR- AISING</div> </div>
<b>B.</b> Full Name (Last, First, Middle Initial) FLS Connect	<b>Transaction ID:</b> 90921.E19737 <b>Date of Disbursement</b>
Mailing Address 7300 Hudson Blvd N Ste 270	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 8 / 2 0 0 8</div> </div>
City State Zip Code Saint Paul MN 55128-7143 Purpose of Disbursement Party telemarketing/fundraising Candidate Name	Amount of Each Disbursement this Period <div>539.00</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State: District:</div> </div> <div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General</div> <div><input type="checkbox"/> Other (specify) ▼</div> </div>	<div> <div>Category/Type</div> <div>PARTY TELEMARKETING/FUNDR- AISING</div> </div>
<b>C.</b> Full Name (Last, First, Middle Initial) Pinnacle Direct, Inc.	<b>Transaction ID:</b> 90921.E19274 <b>Date of Disbursement</b>
Mailing Address 15260 113th Street North	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div>
City State Zip Code Stillwater MN 55082- Purpose of Disbursement Generic Party Printing Candidate Name	Amount of Each Disbursement this Period <div>22880.13</div>
<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>State: District:</div> </div> <div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General</div> <div><input type="checkbox"/> Other (specify) ▼</div> </div>	<div> <div>Category/Type</div> <div>GENERIC PARTY PRINTING</div> </div>

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

**53001.48**

**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)

PAGE 213 / 255

☐ 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)  
Pinnacle Direct, Inc.

Mailing Address 15260 113th Street North

City State Zip Code  
Stillwater MN 55082-

Purpose of Disbursement  
Generic Party Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19733

Date of Disbursement

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

Amount of Each Disbursement this Period

34834.67

GENERIC PARTY PRINTING

**B.**

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  
Generic Party Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19801

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 2 5 / 2 0 0 8

Amount of Each Disbursement this Period

3432.27

GENERIC PARTY PRINTING

**C.**

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  
Generic Party Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID:** 90921.E19816

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 2 5 / 2 0 0 8

Amount of Each Disbursement this Period

7587.27

GENERIC PARTY PRINTING

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

45854.21

**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 214 / 255

<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)  
Pinnacle Direct, Inc.

Mailing Address 15260 113th Street North

City State Zip Code  
Stillwater MN 55082-Purpose of Disbursement  
Generic Party Printing

Candidate Name

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

State: District:

Transaction ID: 90921.E19800

Date of Disbursement

M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Amount of Each Disbursement this Period

20307.25

GENERIC PARTY PRINTING

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  
Generic Party Printing

Candidate Name

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

State: District:

Transaction ID: 90921.E19730

Date of Disbursement

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

Amount of Each Disbursement this Period

7982.46

GENERIC PARTY PRINTING

C.

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  
Generic Party Printing

Candidate Name

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

State: District:

Transaction ID: 90921.E19792

Date of Disbursement

M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Amount of Each Disbursement this Period

2805.00

GENERIC PARTY PRINTING

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

31094.71

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 215 / 255

☐ 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)  
Assurant Employee Benefits

Mailing Address 2323 Grand Blvd

City State Zip Code  
Kansas City MO 64108-

Purpose of Disbursement  
FEA Employees Life & Disability Be  
Candidate Name

Category/  
Type

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

Transaction ID: 90921.E19803  
Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 09 25 2008

Amount of Each Disbursement this Period

232.25

FEA EMPLOYEES LIFE & DISA-  
BILITY BE

**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  
Payroll  
Candidate Name

Category/  
Type

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

Transaction ID: 90921.E19827  
Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 09 25 2008

Amount of Each Disbursement this Period

836.29

PAYROLL

**C.**

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  
Generic Party Printing  
Candidate Name

Category/  
Type

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

Transaction ID: 90921.E19270  
Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 09 11 2008

Amount of Each Disbursement this Period

3408.41

GENERIC PARTY PRINTING

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

4476.95

**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)

PAGE 216 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Frog Leg LLC	<b>Transaction ID:</b> 90921.E19277 <b>Date of Disbursement</b>
Mailing Address 3216 Congressional Pkwy	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 1 / 2 0 0 8</div> </div>
City State Zip Code Fort Wayne IN 46808-4417	<b>Amount of Each Disbursement this Period</b> <div>14211.68</div>
Purpose of Disbursement Political Buttons Candidate Name	<div> <div>Category/Type</div> <div>POLITICAL BUTTONS</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>B.</b> Full Name (Last, First, Middle Initial) Pinnacle List Company	<b>Transaction ID:</b> 90921.E19732 <b>Date of Disbursement</b>
Mailing Address 2800 S Shirlington Rd Ste 401	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 8 / 2 0 0 8</div> </div>
City State Zip Code Arlington VA 22206-3608	<b>Amount of Each Disbursement this Period</b> <div>8736.87</div>
Purpose of Disbursement Generic Party Printing Candidate Name	<div> <div>Category/Type</div> <div>GENERIC PARTY PRINTING</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>C.</b> Full Name (Last, First, Middle Initial) Minnesota State Fair	<b>Transaction ID:</b> 90921.E19717 <b>Date of Disbursement</b>
Mailing Address 1265 Snelling Ave N	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 0 8</div> </div>
City State Zip Code St Paul MN 55108-	<b>Amount of Each Disbursement this Period</b> <div>2500.03</div>
Purpose of Disbursement Minnesota State Fair Booth Fee Candidate Name	<div> <div>Category/Type</div> <div>MINNESOTA STATE FAIR BOOTH FEE</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) .....

25448.58

**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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 217 / 255

☐ 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

<b>A.</b> Full Name (Last, First, Middle Initial) Principal Financial Group	<b>Transaction ID:</b> 90921.E19806 <b>Date of Disbursement</b>
Mailing Address 711 High St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 0 8</div> </div>
City Des Moines State IA Zip Code 50392-0001	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA Employee Benefits-Dental	<div>840.83</div>
Candidate Name	<div>Category/ Type</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) ▼	<b>FEA EMPLOYEE BENEFITS-DEN-TAL</b>
State: District:	
<b>B.</b> Full Name (Last, First, Middle Initial) MN Dept of Revenue	<b>Transaction ID:</b> 90921.E19993 <b>Date of Disbursement</b>
Mailing Address 658 Cedar St Ste 400	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 8 / 2 0 0 8</div> </div>
City Saint Paul State MN Zip Code 55155-1603	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement MN State Sales Taxes	<div>2993.00</div>
Candidate Name	<div>Category/ Type</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) ▼	<b>MN STATE SALES TAXES</b>
State: District:	
<b>C.</b> Full Name (Last, First, Middle Initial) Ameriprise Financial Services, Inc.	<b>Transaction ID:</b> 90921.E19814 <b>Date of Disbursement</b>
Mailing Address 70205 Ameriprise Financial Ctr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 5 / 2 0 0 8</div> </div>
City Minneapolis State MN Zip Code 55474-0702	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FEA Employees IRA Contributions	<div>1241.54</div>
Candidate Name	<div>Category/ Type</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) ▼	<b>FEA EMPLOYEES IRA CONTRIB-UTIONS</b>
State: District:	

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

**5075.37**

**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)

PAGE 218 / 255

<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)

UPS Store

Mailing Address 3432 Denmark Ave

City  
Eagan

State  
MN

Zip Code  
55123-

Purpose of Disbursement  
Generic Party Printing

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 90921.E19288

Date of Disbursement

/   /

Amount of Each Disbursement this Period

607.98

GENERIC PARTY PRINTING

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

607.98

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

417926.01

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

PAGE 219 / 255

FOR LINE 13 OF FORM 3X

**LOANS**NAME 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

6389.56

Balance Outstanding at Close of This Period

233711.58

**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) ▶

233711.58

**TOTALS** This Period (last page in this line only) ▶

233711.58

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

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 220 / 255

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
Republican Party of Minnesota

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
FLS Connect

Nature of Debt (Purpose):  
Indep Exp GOTV calls

Mailing Address 7300 Hudson Blvd N Ste 270

City	State	ZIP Code
Saint Paul	MN	55128-7143

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS90921.E23315

Amount Incurred This Period

10270.35

Payment This Period

0.00

Outstanding Balance at Close of This Period

10270.35

1) **SUBTOTALS** This Period This Page (optional)..... ▶

10270.35

2) **TOTALS** This Period (last page this line number only)..... ▶

10270.35

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

233711.58

4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶

243981.93

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 221 / 255

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Republican Party of Minnesota		<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00001313	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee FLS Connect		Date MM / DD / YYYY 09 / 06 / 2008	
Mailing Address 7300 Hudson Blvd N Ste 270		Amount 0.00	
City State Zip Code Saint Paul MN 55128-7143		<b>Transaction ID:</b> 90921.E25837	
Purpose of Expenditure Indep Exp GOTV calls		Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: BRIAN JAMES DAVIS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 28341.87		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Full Name (Last, First, Middle, Initial) of Payee FLS Connect		Date MM / DD / YYYY 09 / 08 / 2008	
Mailing Address 7300 Hudson Blvd N Ste 270		Amount 6530.85	
City State Zip Code Saint Paul MN 55128-7143		<b>Transaction ID:</b> 90921.E25836	
Purpose of Expenditure Indep Exp GOTV calls		Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: BRIAN JAMES DAVIS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 28341.87		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 <b>[MEMO ITEM]</b>	
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....		0.00	
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....			
(c) <b>TOTAL</b> Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
David E. Sturrock Signature		Date MM / DD / YYYY 09 / 21 / 2009	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 222 / 255

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Republican Party of Minnesota		<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00001313	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee FLS Connect		Date M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 8	
Mailing Address 7300 Hudson Blvd N Ste 270		Amount 3739.50	
City State Zip Code Saint Paul MN 55128-7143		Transaction ID: 90921.E25835	
Purpose of Expenditure Indep Exp GOTV calls		Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: BRIAN JAMES DAVIS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 28341.87		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee US Post Office		Date M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 8	
Mailing Address 401 Kellogg Blvd E		Amount 3000.00	
City State Zip Code Saint Paul MN 55101-		Transaction ID: 90921.E21579	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: BRIAN JAMES DAVIS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 28341.87		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
(a) SUBTOTAL of Itemized Independent Expenditures .....		3000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
David E. Sturrock Signature		Date M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 9	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 223 / 255

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Republican Party of Minnesota		<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00001313	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee US Post Office		Date M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 8	
Mailing Address 401 Kellogg Blvd E		Amount 1494.13	
City State Zip Code Saint Paul MN 55101-		Transaction ID: 90921.E21580	
Purpose of Expenditure postage-see memo text		Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: BRIAN JAMES DAVIS		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008 [MEMO ITEM]	
28341.87			
Full Name (Last, First, Middle, Initial) of Payee P2b Strategies		Date M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 8	
Mailing Address 4750 E 53rd St Apt 206		Amount 9083.26	
City State Zip Code Minneapolis MN 55417-2357		Transaction ID: 90921.E19819	
Purpose of Expenditure Mail		Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: BRIAN JAMES DAVIS		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2008	
28341.87			
(a) SUBTOTAL of Itemized Independent Expenditures .....		9083.26	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures .....		12083.26	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
David E. Sturrock Signature		Date M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 9	

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 224 / 255  
 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  
 0 9 / 1 2 / 2 0 0 8

TOTAL AMOUNT TRANSFERRED

72639.18

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

72639.18

Transaction ID: H390921.C691524

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) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....



**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 225 / 255  
 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  
 0 9 / 2 3 / 2 0 0 8

TOTAL AMOUNT TRANSFERRED

51256.16

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

51256.16

Transaction ID: H390921.C691523

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) .....

123895.34

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) .....

123895.34

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 226 / 255  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A. 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 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

699921.14

Date 

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

Transaction ID: H490921.E19265

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4017.57

7142.34

11159.91

**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 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

702404.55

Date 

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

Transaction ID: H490921.E19266

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

877.50

1560.00

2437.50

**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 Record Maint.Category/  
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

704266.55

Date 

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

Transaction ID: H490921.E19276

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

92.25

164.00

256.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4987.32

8866.34

13853.66

**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 227 / 255  
 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:  
 Ink Cartaridge

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

688761.23

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 11 / 2008

Transaction ID: H490921.E19280

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

40.54

72.07

112.61

**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

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

703289.31

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 11 / 2008

Transaction ID: H490921.E19282

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

20.52

36.48

57.00

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

Mailing Address  
 Po Box 1140

City State Zip Code  
 Memphis TN 38101-

Purpose of Disbursement:  
 Party Shipping/ 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

684580.73

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 11 / 2008

Transaction ID: H490921.E19283

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

18.23

32.40

50.63

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

79.29

140.95

220.24

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 228 / 255  
FOR LINE 21a OF FORM 3X

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 State Zip Code

Hopkins MN 55305-

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

688481.48

Date 

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

Transaction ID: H490921.E19284

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1404.27

2496.48

3900.75

**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

688552.58

Date 

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

Transaction ID: H490921.E19286

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

25.60

45.50

71.10

**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

688648.62

Date 

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

Transaction ID: H490921.E19287

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

1464.44

2603.45

4067.89

**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 229 / 255  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A. Full Name (Last, First, Middle Initial)**  
 UPS Store

Mailing Address

3432 Denmark Ave

City State Zip Code

Eagan MN 55123-

Purpose of Disbursement:  
 Party Print-Business Cards/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

699967.05

Date 

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

Transaction ID: H490921.E19289

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

16.53

29.38

45.91

**B. Full Name (Last, First, Middle Initial)**  
 RIC Property Management Inc.

Mailing Address

355 Garfield St S

City State Zip Code

Cambridge MN 55008-1375

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

705266.55

Date 

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

Transaction ID: H490921.E19433

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

360.00

640.00

1000.00

**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

703232.31

Date 

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

Transaction ID: H490921.E19451

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

297.99

529.77

827.76

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

674.52

1199.15

1873.67

**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 230 / 255  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A. Full Name (Last, First, Middle Initial)**  
 Etco Properties, Inc.

Mailing Address

600 Twelve Oaks Center Dr Suite 554

City State Zip Code  
 Wayzata MN 55391-4520

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

707066.55

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

Transaction ID: H490921.E19453

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

648.00

1152.00

1800.00

**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: Not 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

711246.02

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

Transaction ID: H490921.E19485

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1128.57

2006.35

3134.92

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

Transaction ID: H490921.E19486

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

1776.57

3158.35

4934.92

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 231 / 255  
 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 09 / 12 / 2008

Transaction ID: H490921.E19571

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

291.28

517.82

809.10

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

Mailing Address  
 3900 Bethel Dr # 1102

City State Zip Code  
 Saint Paul MN 55112-6902

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

43.79

Date 09 / 12 / 2008

Transaction ID: H490921.E19569

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

15.76

28.03

43.79

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

Mailing Address  
 242 Humboldt Ave N

City State Zip Code  
 Minneapolis MN 55405-1435

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

703.78

Date 09 / 12 / 2008

Transaction ID: H490921.E19567

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

253.36

450.42

703.78

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 232 / 255

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A. Full Name (Last, First, Middle Initial)**  
Alicia Long

Mailing Address

242 Humboldt Ave N

City	State	Zip Code
Minneapolis	MN	55405-1435

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

703.78

Date 09 / 12 / 2008

Transaction ID: H490921.E19568

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

253.36

450.42

703.78

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

Mailing Address

301 Shelard Pkwy Apt 348

City	State	Zip Code
Minneapolis	MN	55426-1046

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

46.76

Date 09 / 12 / 2008

Transaction ID: H490921.E19570

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

16.83

29.93

46.76

**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 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

708111.10

Date 09 / 12 / 2008

Transaction ID: H490921.E19575

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

376.04

668.51

1044.55

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

376.04

668.51

1044.55

**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 233 / 255  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A. 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

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

905.36

Activity or Event Identifier:

ADMINISTRATION B 2

**[MEMO ITEM]** ITEMIZE: Non-FEA Payroll Taxes

Date 09 / 12 / 2008

Transaction ID: H490921.E25017

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

325.93

579.43

905.36

**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:

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

139.19

Activity or Event Identifier:

ADMINISTRATION B 2

**[MEMO ITEM]** ITEMIZE: Non-FEA Payroll Taxes

Date 09 / 12 / 2008

Transaction ID: H490921.E19709

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

50.11

89.08

139.19

**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: Not 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

774323.48

Activity or Event Identifier:

ADMINISTRATION B 2

Date 09 / 26 / 2008

Transaction ID: H490921.E19676

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

949.71

1688.38

2638.09

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

949.71

1688.38

2638.09

**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 234 / 255  
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 09 / 26 / 2008

Transaction ID: H490921.E19687

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 09 / 26 / 2008

Transaction ID: H490921.E19690

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

291.28

517.82

809.10

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

Mailing Address

3900 Bethel Dr # 1102

City	State	Zip Code
Saint Paul	MN	55112-6902

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

47.71

Date 09 / 26 / 2008

Transaction ID: H490921.E19689

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

17.18

30.53

47.71

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 235 / 255  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A. Full Name (Last, First, Middle Initial)**  
 Alicia Long

Mailing Address

242 Humboldt Ave N

City	State	Zip Code
Minneapolis	MN	55405-1435

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

150.33

Date 09 / 26 / 2008

Transaction ID: H490921.E19684

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

54.12

96.21

150.33

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

Mailing Address

242 Humboldt Ave N

City	State	Zip Code
Minneapolis	MN	55405-1435

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

150.33

Date 09 / 26 / 2008

Transaction ID: H490921.E19685

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

54.12

96.21

150.33

**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

410.91

Date 09 / 26 / 2008

Transaction ID: H490921.E19686

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

147.93

262.98

410.91

**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 236 / 255  
 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

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

242.00

Activity or Event Identifier:  
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Non FEA Salary

Date 09 / 26 / 2008

Transaction ID: H490921.E19688

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

87.12

154.88

242.00

**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

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

775023.41

Activity or Event Identifier:  
 ADMINISTRATION B 2

Date 09 / 26 / 2008

Transaction ID: H490921.E19691

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

251.97

447.96

699.93

**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

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

627.50

Activity or Event Identifier:  
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: Non-FEA Payroll Taxes

Date 09 / 26 / 2008

Transaction ID: H490921.E25047

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

225.90

401.60

627.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

251.97

447.96

699.93

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 237 / 255

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

72.43

Date

M M /

D D /

Y Y Y Y

0 9

2 6

2 0 0 8

Transaction ID: H490921.E19711

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

26.07

46.36

72.43

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

Mailing Address

7300 Hudson Blvd. Suite 165

City

State

Zip Code

Oakdale

MN

55128-

Purpose of Disbursement:

Office Equipment

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

713940.97

Date

M M /

D D /

Y Y Y Y

0 9

1 8

2 0 0 8

Transaction ID: H490921.E19727

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

154.08

273.92

428.00

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

Mailing Address

6520 W Lake St

City

State

Zip Code

Minneapolis

MN

55426-

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

714090.97

Date

M M /

D D /

Y Y Y Y

0 9

1 8

2 0 0 8

Transaction ID: H490921.E19729

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

54.00

96.00

150.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

208.08

369.92

578.00

**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 238 / 255  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A. 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

713512.97

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 18 / 2008

Transaction ID: H490921.E19734

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

816.10

1450.85

2266.95

**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

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

756219.28

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 18 / 2008

Transaction ID: H490921.E19738

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

70.93

126.11

197.04

**C. 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

756022.24

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 18 / 2008

Transaction ID: H490921.E19739

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

14267.08

25363.69

39630.77

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

15154.11

26940.65

42094.76

**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 239 / 255  
 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 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

714228.97

Date 

M	M
0	9

 / 

D	D
1	8

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E19740

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

49.68

88.32

138.00

**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

716391.47

Date 

M	M
0	9

 / 

D	D
1	8

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E19742

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

778.50

1384.00

2162.50

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

Mailing Address

202 West Superior St

City	State	Zip Code
Duluth	MN	55802-

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

769285.39

Date 

M	M
0	9

 / 

D	D
2	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E19786

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

360.00

640.00

1000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1188.18

2112.32

3300.50

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 240 / 255  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A. Full Name (Last, First, Middle Initial)**  
 RIC Property Management Inc.

Mailing Address

355 Garfield St S

City

State

Zip Code

Cambridge

MN

55008-1375

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

771685.39

Date 09 / 25 / 2008

Transaction ID: H490921.E19787

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

360.00

640.00

1000.00

**B. Full Name (Last, First, Middle Initial)**  
 Star Properties of Rochester, Inc

Mailing Address

1530 Greenview Dr

City

State

Zip Code

Rochester

MN

55902-

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

764426.87

Date 09 / 25 / 2008

Transaction ID: H490921.E19788

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

432.00

768.00

1200.00

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

Mailing Address

6868 Washington Ave S

City

State

Zip Code

Eden Prairie

MN

55344-

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

768285.39

Date 09 / 25 / 2008

Transaction ID: H490921.E19789

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

991.44

1762.56

2754.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1783.44

3170.56

4954.00

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 241 / 255  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A. Full Name (Last, First, Middle Initial)**  
 Nicollet Business Center

Mailing Address

1625 Energy Park Drive Suite 100

City State Zip Code

Saint Paul MN 55108-

Purpose of Disbursement:  
Office 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

763226.87

Date 09 / 25 / 2008

Transaction ID: H490921.E19790

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

397.17

706.08

1103.25

**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 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

760086.47

Date 09 / 25 / 2008

Transaction ID: H490921.E19794

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

666.52

1184.92

1851.44

**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:  
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

764714.48

Date 09 / 25 / 2008

Transaction ID: H490921.E19797

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

103.54

184.07

287.61

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1167.23

2075.07

3242.30

**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 242 / 255

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A. Full Name (Last, First, Middle Initial)**  
City Of St. Paul

Mailing Address

350 St. Peter Suite 300

City	State	Zip Code
St. Paul	MN	55101-

Purpose of Disbursement:  
Parking 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

760111.47

Date 09 / 25 / 2008

Transaction ID: H490921.E19799

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

9.00

16.00

25.00

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

Mailing Address

2323 Grand Blvd

City	State	Zip Code
Kansas City	MO	64108-

Purpose of Disbursement:  
Employee Life & Disab Ben-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

762001.34

Date 09 / 25 / 2008

Transaction ID: H490921.E19802

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10.03

17.84

27.87

**C. 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

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

762123.62

Date 09 / 25 / 2008

Transaction ID: H490921.E19807

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

23.50

41.78

65.28

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

42.53

75.62

118.15

**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 243 / 255

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A. 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

758235.03

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	8

Transaction ID: H490921.E19809

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

77.67

138.08

215.75

**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:  
 Storage 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

760473.47

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	8

Transaction ID: H490921.E19810

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

49.68

88.32

138.00

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

Mailing Address

6897 139th Ln NW

City	State	Zip Code
Anoka	MN	55303-4814

 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

770685.39

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	8

Transaction ID: H490921.E19813

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

504.00

896.00

1400.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

631.35

1122.40

1753.75

**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 244 / 255  
 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:  
 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

765531.39

Date 

M	M
0	9

 / 

D	D
2	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E19815

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
294.09		522.82		816.91

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

Mailing Address

205 Pennsylvania Avenue, Se

City	State	Zip Code
Washington	DC	20003-

Purpose of Disbursement:  
 Party Software Service

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

761973.47

Date 

M	M
0	9

 / 

D	D
2	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E19817

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
540.00		960.00		1500.00

**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

762058.34

Date 

M	M
0	9

 / 

D	D
2	5

 / 

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E19818

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
854.61		1519.30		2373.91

**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 245 / 255  
 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/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

760335.47

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 25 / 2008

Transaction ID: H490921.E19823

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

80.64

143.36

224.00

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

Mailing Address  
 11256 86th Avenue W

City State Zip Code  
 Minnetonka Beach MN 55361-

Purpose of Disbursement:  
 Rent Deposit

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

791702.24

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 30 / 2008

Transaction ID: H490921.E19824

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

900.00

1600.00

2500.00

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

Mailing Address  
 11256 86th Avenue W

City State Zip Code  
 Minnetonka Beach MN 55361-

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

793202.24

Date  M  M /  D  D /  Y  Y  Y  Y  
 09 / 30 / 2008

Transaction ID: H490921.E19825

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

540.00

960.00

1500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1520.64

2703.36

4224.00

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 246 / 255  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

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

Richard Edward Murray

## Mailing Address

137 Riverside Dr NE

City State Zip Code

Saint Cloud MN 56304-

Purpose of Disbursement:  
Usual/Normal Office 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

757519.28

Date  M  M /  D  D /  Y  Y  Y  Y

Transaction ID: H490921.E19840

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

468.00

832.00

1300.00

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

Frederick J Wright

## Mailing Address

2316 6th St S

City State Zip Code

Moorhead MN 56560-4104

Purpose of Disbursement:  
Payment to landlord for 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

758019.28

Date  M  M /  D  D /  Y  Y  Y  Y

Transaction ID: H490921.E19843

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

180.00

320.00

500.00

**C. 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 PAYMENTCategory/  
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

789202.24

Date  M  M /  D  D /  Y  Y  Y  Y

Transaction ID: H490921.E19911

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5104.38

9074.45

14178.83

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5752.38

10226.45

15978.83

**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 247 / 255  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Minnesota

**A. Full Name (Last, First, Middle Initial)**  
 Loop Parking Company

Mailing Address

1300 Nicollet Ave

City	State	Zip Code
Minneapolis	MN	55403-2667

Purpose of Disbursement:  
 ITEMIZE: CC - parking

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - parking

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

19.00

Date 09 / 29 / 2008

Transaction ID: H490921.E19912

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

6.84

12.16

19.00

**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:  
 ITEMIZE: CC - lodging

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - lodging

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

200.00

Date 09 / 29 / 2008

Transaction ID: H490921.E19913

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

72.00

128.00

200.00

**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:  
 ITEMIZE: CC - lodging

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - lodging

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

1159.00

Date 09 / 29 / 2008

Transaction ID: H490921.E19914

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

417.24

741.76

1159.00

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 248 / 255  
 FOR LINE 21a OF FORM 3X

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	55101-1703

Purpose of Disbursement:  
 ITEMIZE: CC - lodging

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - lodging

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

1210.98

Date 09 / 29 / 2008

Transaction ID: H490921.E19915

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

435.95

775.03

1210.98

**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:  
 ITEMIZE: CC - lodging

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - lodging

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

1159.00

Date 09 / 29 / 2008

Transaction ID: H490921.E19916

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

417.24

741.76

1159.00

**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:  
 ITEMIZE: CC - lodging

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - lodging

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

1448.02

Date 09 / 29 / 2008

Transaction ID: H490921.E19917

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

521.29

926.73

1448.02

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 249 / 255  
FOR LINE 21a OF FORM 3X

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

55101-1703

Purpose of Disbursement:

ITEMIZE: CC - lodging

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

1412.64

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - lodging

Date 09 / 29 / 2008

Transaction ID: H490921.E19918

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

508.55

904.09

1412.64

**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:

ITEMIZE: CC - lodging

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

1384.00

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - lodging

Date 09 / 29 / 2008

Transaction ID: H490921.E19919

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

498.24

885.76

1384.00

**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:

ITEMIZE: CC - lodging

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

1187.00

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - lodging

Date 09 / 29 / 2008

Transaction ID: H490921.E19920

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

427.32

759.68

1187.00

**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 250 / 255  
 FOR LINE 21a OF FORM 3X

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

55101-1703

Purpose of Disbursement:

ITEMIZE: CC - lodging

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

927.55

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - lodging

Date 09 / 29 / 2008

Transaction ID: H490921.E19921

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

333.92

593.63

927.55

**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:

ITEMIZE: CC - lodging

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

1776.21

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - lodging

Date 09 / 29 / 2008

Transaction ID: H490921.E19922

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

639.44

1136.77

1776.21

**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:

ITEMIZE: CC - lodging

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

826.95

Activity or Event Identifier:

ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - lodging

Date 09 / 29 / 2008

Transaction ID: H490921.E19923

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

297.70

529.25

826.95

**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 251 / 255  
 FOR LINE 21a OF FORM 3X

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

55101-1703

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

12.14

Date 09 / 29 / 2008

Transaction ID: H490921.E19924

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

4.37

7.77

12.14

**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:

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

6.35

Date 09 / 29 / 2008

Transaction ID: H490921.E19925

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

2.29

4.06

6.35

**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:

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

25.00

Date 09 / 29 / 2008

Transaction ID: H490921.E19926

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

9.00

16.00

25.00

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 252 / 255  
 FOR LINE 21a OF FORM 3X

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

55101-1703

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

24.99

Activity or Event Identifier:  
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - meal

Date 09 / 29 / 2008

Transaction ID: H490921.E19927

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9.00

15.99

24.99

**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:  
 ITEMIZE: CC - lodging

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

200.00

Activity or Event Identifier:  
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - lodging

Date 09 / 29 / 2008

Transaction ID: H490921.E19928

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

72.00

128.00

200.00

**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:  
 ITEMIZE: CC - lodging

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

200.00

Activity or Event Identifier:  
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - lodging

Date 09 / 29 / 2008

Transaction ID: H490921.E19929

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

72.00

128.00

200.00

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 253 / 255  
 FOR LINE 21a OF FORM 3X

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

55101-1703

Purpose of Disbursement:  
 ITEMIZE: CC - lodging

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - lodging

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

200.00

Date 09 / 29 / 2008

Transaction ID: H490921.E19930

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

72.00

128.00

200.00

**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:  
 ITEMIZE: CC - lodging

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - lodging

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

200.00

Date 09 / 29 / 2008

Transaction ID: H490921.E19931

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

72.00

128.00

200.00

**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:  
 ITEMIZE: CC - lodging

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

[MEMO ITEM] ITEMIZE: CC - lodging

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

200.00

Date 09 / 29 / 2008

Transaction ID: H490921.E19932

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

72.00

128.00

200.00

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 254 / 255  
 FOR LINE 21a OF FORM 3X

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	55101-1703

Purpose of Disbursement:  
 ITEMIZE: CC - lodging

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

**[MEMO ITEM]** ITEMIZE: CC - lodging

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

200.00

Date 09 / 29 / 2008

Transaction ID: H490921.E19933

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

72.00

128.00

200.00

**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:  
 ITEMIZE: CC - lodging

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 2

**[MEMO ITEM]** ITEMIZE: CC - lodging

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

200.00

Date 09 / 29 / 2008

Transaction ID: H490921.E19934

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

72.00

128.00

200.00

**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

703645.97

Date 09 / 11 / 2008

Transaction ID: H490921.E19970

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

128.40

228.26

356.66

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

128.40

228.26

356.66

**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	255 / 255
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

704010.30

 Date   

M	M
0	9

 /   

D	D
1	1

 /   

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E19971

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
131.16		233.17		364.33

**B. 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 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

684530.10

 Date   

M	M
0	9

 /   

D	D
0	3

 /   

Y	Y	Y	Y
2	0	0	8

Transaction ID: H490921.E19977

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1417.59		2520.15		3937.74

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1548.75		2753.32		4302.07

**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
40539.56	72070.32	112609.88