

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED

Office Use Only

APR 20 AM 9:23

12FE4M5 EC MAIL CENTER

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

MOTORCYCLE PAC OF MINNESOTA

ADDRESS (number and street)

8360 SUFFOLK DRIVE

Check if different than previously reported. (ACC)

CHAMBERLAIN

MM

55317

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00402769

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 Year-End 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 (12S)

Election on

MM / DD / YYYY

in the State of

(d) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY 07 / 01 / 2014

through

MM / DD / YYYY 09 / 30 / 2014

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

MARK SENN

Signature of Treasurer

Mark Senn

Date

MM / DD / YYYY 10 / 15 / 2014

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

MOTORCYCLE PAC OF MINNESOTA

Report Covering the Period: From:

07 01 2014

To:

09 30 2014

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1,	2014		20,824.61
(b) Cash on Hand at Beginning of Reporting Period.....		19,003.57	
(c) Total Receipts (from Line 19).....		421,598	748,244
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....		232,195.5	283,070.5
7. Total Disbursements (from Line 31).....		7,100.00	12,187.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....		1,611.955	1,611.955
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....			
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....			

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. 02/2003)

Page 3

Write or Type Committee Name

MOTORCYCLE PAC OF MINNESOTA

Report Covering the Period: From:

MM / DD / YYYY
07 / 01 / 2014

To:

MM / DD / YYYY
09 / 30 / 2014

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).....

--

--

(ii) Unitemized.....

4,215.98

7,769.94

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

4,215.98

7,769.94

(b) Political Party Committees.....

--

--

(c) Other Political Committees

(such as PACs).....

--

--

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

4,215.98

7,769.94

12. Transfers From Affiliated/Other

Party Committees.....

--

--

13. All Loans Received.....

--

--

14. Loan Repayments Received.....

--

--

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

--

7,125.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

--

--

17. Other Federal Receipts

(Dividends, Interest, etc.).....

--

--

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

...(from Schedule H3).....

--

--

(b) Levin Funds (from Schedule H5).....

--

--

(c) Total Transfers (add 18(a) and 18(b))..

--

--

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)).....▶

4,215.98

7,482.44

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

4,215.98

7,482.44

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DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees	6,500.00	10,500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements	6,000.00	1,687.50
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7,100.00	12,187.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	7,100.00	12,187.50

140001-1M1-1W01

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	4,215.98	77,699.4
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4,215.98	77,699.4
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		7,125.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)		(7,125.00)

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SCHEDULE B (FEC Form 3X)

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

MOTORCYCLE PAC OF MINNESOTA

Full Name (Last, First, Middle Initial)

<p>A. EMMER FOR CONGRESS</p>		<p>Date of Disbursement</p> <p>NOV 08 '11 2014</p>	
<p>Mailing Address</p> <p>P.O. BOX 998</p>			
<p>City</p> <p>ANOKA</p>	<p>State</p> <p>MN</p>	<p>Zip Code</p> <p>55303</p>	
<p>Purpose of Disbursement</p> <p>CONTRIBUTION TO CANDIDATE</p>		<p>Category/Type</p> <p>011</p>	<p>Amount of Each Disbursement this Period</p> <p>1,000.00</p>
<p>Candidate Name</p> <p>TOM EMMER</p>			
<p>Office Sought:</p> <p><input checked="" type="checkbox"/> House</p> <p><input type="checkbox"/> Senate</p> <p><input type="checkbox"/> President</p>	<p>Disbursement For:</p> <p><input type="checkbox"/> Primary</p> <p><input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		
<p>State: MN</p>	<p>District: 6</p>		

<p>B. BOEHNER FOR SPEAKER</p>		<p>Date of Disbursement</p> <p>NOV 08 '14 2014</p>	
<p>Mailing Address</p> <p>320 FIRST STREET, SE</p>			
<p>City</p> <p>WASHINGTON, D.C.</p>	<p>State</p> <p></p>	<p>Zip Code</p> <p>20003</p>	
<p>Purpose of Disbursement</p> <p>CONTRIBUTION TO CANDIDATE</p>		<p>Category/Type</p> <p>011</p>	<p>Amount of Each Disbursement this Period</p> <p>2,000.00</p>
<p>Candidate Name</p> <p>JOHN BOEHNER</p>			
<p>Office Sought:</p> <p><input checked="" type="checkbox"/> House</p> <p><input type="checkbox"/> Senate</p> <p><input type="checkbox"/> President</p>	<p>Disbursement For:</p> <p><input type="checkbox"/> Primary</p> <p><input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		
<p>State: OHIO</p>	<p>District:</p>		

<p>C. FRIENDS OF ERIK PAULSEN</p>		<p>Date of Disbursement</p> <p>NOV 09 '19 2014</p>	
<p>Mailing Address</p> <p>P.O. BOX 44369</p>			
<p>City</p> <p>EDEN PRAIRIE</p>	<p>State</p> <p>MN</p>	<p>Zip Code</p> <p>55344</p>	
<p>Purpose of Disbursement</p> <p>CONTRIBUTION TO CANDIDATE</p>		<p>Category/Type</p> <p>011</p>	<p>Amount of Each Disbursement this Period</p> <p>2,000.00</p>
<p>Candidate Name</p> <p>ERIK PAULSEN</p>			
<p>Office Sought:</p> <p><input checked="" type="checkbox"/> House</p> <p><input type="checkbox"/> Senate</p> <p><input type="checkbox"/> President</p>	<p>Disbursement For:</p> <p><input type="checkbox"/> Primary</p> <p><input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>		
<p>State:</p>	<p>District:</p>		

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

5,000.00

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

140M1MN1702

**SCHEDULE 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 2 OF 2
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
MOTORCYCLE PAC OF MINNESOTA

A.

Full Name (Last, First, Middle Initial) **KLINE FOR CONGRESS**

Date of Disbursement **09 / 22 / 2014**

Mailing Address **101 WEST BURNVILLE PKWY #104**

City **BURNVILLE** State **MN** Zip Code **55337**

Purpose of Disbursement **CONTRIBUTION TO CANDIDATE** Category/Type **0.1.1**

Candidate Name **JOHN KLINE**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **Amount of Each Disbursement this Period **500.00****

State: **MN** District: **2**

B.

Full Name (Last, First, Middle Initial) **EMMER FOR CONGRESS**

Date of Disbursement **09 / 23 / 2014**

Mailing Address **P.O. BOX 998**

City **ANOKA** State **MN** Zip Code **55303**

Purpose of Disbursement **CONTRIBUTION TO CANDIDATE** Category/Type **0.1.1**

Candidate Name **TOM EMMER**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **Amount of Each Disbursement this Period **1,000.00****

State: **MN** District: **6**

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **Amount of Each Disbursement this Period**

State: District:

SUBTOTAL of Disbursements This Page (optional)..... **1,500.00**

TOTAL This Period (last page this line number only)..... **6,500.00**

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MINNEAPOLIS MN 554

15 OCT 2014 PM 7 L

MARK O. SENN
8360 Suffolk Drive
Chanhassen, MN 55317

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999 E. STREET, NW
WASHINGTON, D.C. 20463

20463

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

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<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

JB
 PREPARER
 (8/2013)

10/20/2014
 DATE PREPARED

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