



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Minnesota Democratic-Farmer-Labor Party**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="128080.27"/>	<input type="text" value="128080.27"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="152279.50"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="250859.12"/>	<input type="text" value="1464348.71"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="403138.62"/>	<input type="text" value="1592428.98"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="248790.85"/>	<input type="text" value="1438081.21"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="154347.77"/>	<input type="text" value="154347.77"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="220675.01"/>	

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

Write or Type Committee Name

**Minnesota Democratic-Farmer-Labor Party**

Report Covering the Period: From:  /  /  To:  /  /

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).....	22600.00	128935.55
(ii) Unitemized .....	82235.44	407650.69
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	104835.44	536586.24
(b) Political Party Committees .....	3220.00	16100.00
(c) Other Political Committees (such as PACs).....	17016.00	34702.80
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	125071.44	587389.04
12. Transfers From Affiliated/Other Party Committees.....	5000.00	205944.68
13. All Loans Received .....	0.00	175000.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	1005.39	14959.31
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	13035.68	93562.76
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	106746.61	387492.92
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	106746.61	387492.92
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	250859.12	1464348.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	144112.51	1076855.79

**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 .....	41397.23	162493.70
(ii) Non-Federal Share.....	112887.21	423622.68
(b) Other Federal Operating Expenditures .....	90377.26	471334.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	244661.70	1057450.42
22. Transfers to Affiliated/Other Party Committees.....	250.00	13250.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	1310.84	1310.84
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	195.00	1645.00
(b) Political Party Committees .....	1889.00	1889.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	2084.00	3534.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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 .....	484.31	362535.95
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	484.31	362535.95
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	248790.85	1438081.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	135903.64	1014458.53

**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) .....	125071.44	587389.04
34. Total Contribution Refunds (from Line 28(d)) .....	2084.00	3534.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	122987.44	583855.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	131774.49	633827.74
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1005.39	14959.31
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	130769.10	618868.43

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

The party paid for all volunteer materials with its own funds. No funds from National Party Transfers were used in association with these activities. Disbursements itemized on Schedule B, line 21b relate to individuals that are paid 100% federal but not currently involved in federal election activity. Disbursements itemized on Schedule H4, Line 21a relate to individuals who spend more than 0% but less than 25% in a given month on any federal election activity. Disbursements itemized on Schedule B, line 30 relate to individuals who spend more than 25% on federal election activity. All related expenses are apportioned accordingly.

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Arthur Allen**  
Full Name (Last, First, Middle Initial)

Mailing Address 445 Iona Ln

City Roseville State MN Zip Code 55113

FEC ID number of contributing federal political committee. **C**

Name of Employer Children's Hospital Occupation Pharmacist

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2015

**Transaction ID : C10236488**

Amount of Each Receipt this Period  
 100.00

**B. Arthur Allen**  
Full Name (Last, First, Middle Initial)

Mailing Address 445 Iona Ln

City Roseville State MN Zip Code 55113

FEC ID number of contributing federal political committee. **C**

Name of Employer Children's Hospital Occupation Pharmacist

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2015

**Transaction ID : C10246953**

Amount of Each Receipt this Period  
 250.00

**C. Kevin Armstrong**  
Full Name (Last, First, Middle Initial)

Mailing Address 506 River St

City Minneapolis State MN Zip Code 55401-2542

FEC ID number of contributing federal political committee. **C**

Name of Employer DST Brokerage Solutions, LLC Occupation General Counsel

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 16 / 2015

**Transaction ID : C10240848**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 360.00

**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: (check only one)	PAGE 8 OF 137
<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)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial) <b>A. Kevin Armstrong</b>		Date of Receipt MM / DD / YYYY 05 / 28 / 2015 <b>Transaction ID : C10246911</b>
Mailing Address 506 River St		Amount of Each Receipt this Period 125.00
City Minneapolis	State MN	Zip Code 55401-2542
FEC ID number of contributing federal political committee. C		
Name of Employer DST Brokerage Solutions, LLC	Occupation General Counsel	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B. Thomas Beaumont</b>		Date of Receipt MM / DD / YYYY 05 / 26 / 2015 <b>Transaction ID : C10245739</b>
Mailing Address 210 W Grant St Apt 417		Amount of Each Receipt this Period 100.00
City Minneapolis	State MN	Zip Code 55403-2245
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

Full Name (Last, First, Middle Initial) <b>C. Michael Bergman</b>		Date of Receipt MM / DD / YYYY 05 / 08 / 2015 <b>Transaction ID : C10236016</b>
Mailing Address 9 W Franklin Ave Apt 207		Amount of Each Receipt this Period 375.00
City Minneapolis	State MN	Zip Code 55404-2595
FEC ID number of contributing federal political committee. C		
Name of Employer Helms Briscoe	Occupation Managing Director	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> 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: (check only one)	PAGE 9 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Joanne Boyer**  
Full Name (Last, First, Middle Initial)

Mailing Address 3041 Quebec Ave S

City Saint Louis Park State MN Zip Code 55426-3252

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Publisher

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 14 / 2015  
**Transaction ID : C10238910**

Amount of Each Receipt this Period  
250.00

**B. Myron Broschat**  
Full Name (Last, First, Middle Initial)

Mailing Address 411 E Everett Ave Apt 270

City Fergus Falls State MN Zip Code 56537-3536

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
05 / 26 / 2015  
**Transaction ID : C10245745**

Amount of Each Receipt this Period  
150.00

**C. Lynn Carlson**  
Full Name (Last, First, Middle Initial)

Mailing Address 1255 Wilderness Run Rd

City Eagan State MN Zip Code 55123-1840

FEC ID number of contributing federal political committee. **C**

Name of Employer Thomson Reuters Occupation Business Analyst

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
05 / 30 / 2015  
**Transaction ID : C10247610**

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> 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: (check only one)	PAGE 10 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Paul Carlson**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 647

City Wadena State MN Zip Code 56482-0647

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 19 / 2015  
**Transaction ID : C10242631**

Amount of Each Receipt this Period  
250.00

**B. Charles Cherry**  
Full Name (Last, First, Middle Initial)

Mailing Address 734 7th St S

City Breckenridge State MN Zip Code 56520-2404

FEC ID number of contributing federal political committee. **C**

Name of Employer North Dakota State University Occupation Teacher

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
05 / 19 / 2015  
**Transaction ID : C10242619**

Amount of Each Receipt this Period  
100.00

**C. Bill Clapp**  
Full Name (Last, First, Middle Initial)

Mailing Address 757 Osceola Ave #1

City Saint Paul State MN Zip Code 55105-3327

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 18 / 2015  
**Transaction ID : C10241370**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)  
**A. Jon Commers**

Mailing Address 2294 Commonwealth Ave

City Saint Paul State MN Zip Code 55108-1601

FEC ID number of contributing federal political committee. **C**

Name of Employer Donjek, Inc. Occupation Redevelopment Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 13 / 2015  
**Transaction ID : C10238098**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Sita Dash**

Mailing Address 4925 Interlachen Ct

City Edina State MN Zip Code 55436-1086

FEC ID number of contributing federal political committee. **C**

Name of Employer DD Innovation, INC Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
05 / 18 / 2015  
**Transaction ID : C10241392**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. Sita Dash**

Mailing Address 4925 Interlachen Ct

City Edina State MN Zip Code 55436-1086

FEC ID number of contributing federal political committee. **C**

Name of Employer DD Innovation, INC Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
05 / 21 / 2015  
**Transaction ID : C10244293**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 450.00

**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: (check only one)	PAGE 12 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Jack Davies**  
Full Name (Last, First, Middle Initial)

Mailing Address 1201 Yale Pl

City State Zip Code  
Minneapolis MN 55403-1901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2015

**Transaction ID : C10243437**

Amount of Each Receipt this Period  
1000.00

**B. Deborah Douglas**  
Full Name (Last, First, Middle Initial)

Mailing Address 2110 14th St NW  
Apt 3

City State Zip Code  
New Brighton MN 55112-2301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
John Arens Insurance Agency Inc Ins Agent/Office Manager

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
535.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2015

**Transaction ID : C10240818**

Amount of Each Receipt this Period  
500.00

**C. Robert DuFresne**  
Full Name (Last, First, Middle Initial)

Mailing Address 1455 W Broadway St Apt 226

City State Zip Code  
Winona MN 55987-2385

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 19 / 2015

**Transaction ID : C10243542**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1600.00
<b>TOTAL</b> 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: (check only one)	PAGE 13 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial) <b>A. Jim Erickson</b>		Date of Receipt MM / DD / YYYY 05 / 02 / 2015 <b>Transaction ID : C10233709</b>
Mailing Address 415 Oak Grove St Apt 600		Amount of Each Receipt this Period 300.00
City Minneapolis	State MN	Zip Code 55403-3990
FEC ID number of contributing federal political committee. C		
Name of Employer Solomon Strategies Group	Occupation Lobbyist, Consultant	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Carol Freeman</b>		Date of Receipt MM / DD / YYYY 05 / 15 / 2015 <b>Transaction ID : C10240772</b>
Mailing Address 3237 Lyndale Ave S		Amount of Each Receipt this Period 35.00
City Minneapolis	State MN	Zip Code 55408-3786
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

Full Name (Last, First, Middle Initial) <b>C. Jacob Frey</b>		Date of Receipt MM / DD / YYYY 05 / 10 / 2015 <b>Transaction ID : C10236539</b>
Mailing Address 316 E Hennepin Ave		Amount of Each Receipt this Period 250.00
City Minneapolis	State MN	Zip Code 55414-1028
FEC ID number of contributing federal political committee. C		
Name of Employer City Of Mpls	Occupation Council Member	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	585.00
<b>TOTAL</b> 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 OF 137 (check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Stephen Gasiorowicz**  
Full Name (Last, First, Middle Initial)

Mailing Address 2630 Glenhurst Ave

City St Louis Park State MN Zip Code 55416-3957

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
05 / 27 / 2015  
**Transaction ID : C10246333**

Amount of Each Receipt this Period  
**250.00**

**B. Charles Gessert**  
Full Name (Last, First, Middle Initial)

Mailing Address 2311 E 3rd St

City Duluth State MN Zip Code 55812-1852

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
05 / 18 / 2015  
**Transaction ID : C10241480**

Amount of Each Receipt this Period  
**200.00**

**C. Roger Gustafson**  
Full Name (Last, First, Middle Initial)

Mailing Address 824 21st St SE

City Rochester State MN Zip Code 55904-5617

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
05 / 21 / 2015  
**Transaction ID : C10244359**

Amount of Each Receipt this Period  
**250.00**

**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 15 OF 137  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)  
**A. Vernae Hasbargen**

Mailing Address 2553 360th St

City Breckenridge State MN Zip Code 56520-9447

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **485.00**

Date of Receipt  
**05 / 27 / 2015**

**Transaction ID : C10246326**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**B. Robert Hatlestad**

Mailing Address 335 Scout Hill Dr

City Glencoe State MN Zip Code 55336-3138

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**05 / 18 / 2015**

**Transaction ID : C10241458**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**C. Richard Hendrickson**

Mailing Address 50 Melbourne Ave SE

City Minneapolis State MN Zip Code 55414-3514

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  
**05 / 13 / 2015**

**Transaction ID : C10237531**

Amount of Each Receipt this Period  
**100.00**

**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: (check only one)	PAGE 16 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial) <b>A. John Hollerud</b>		Date of Receipt
Mailing Address 11950 Goldenrod Cir NW		<input type="text" value="05"/> / <input type="text" value="21"/> / <input type="text" value="2015"/>
City	State	Zip Code
Coon Rapids	MN	55448-2458
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
FCTMC	Physician	
Receipt For: 2016	Aggregate Year-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="400.00"/>

Full Name (Last, First, Middle Initial) <b>B. Cindy Houser</b>		Date of Receipt
Mailing Address 1514 Franklin Ln		<input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2015"/>
City	State	Zip Code
Anoka	MN	55303-2140
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
MNSCU	Instructor	
Receipt For: 2016	Aggregate Year-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>

Full Name (Last, First, Middle Initial) <b>C. Thomas Kayser</b>		Date of Receipt
Mailing Address 466 Mississippi River Blvd S		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code
Saint Paul	MN	55105-1324
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Robbins Kaplan Miller and Cerisi	Attorney	
Receipt For: 2016	Aggregate Year-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1900.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Garrison Keillor**  
Full Name (Last, First, Middle Initial)  
Mailing Address 294 Summit Ave  
City Saint Paul State MN Zip Code 55102-2121  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Writer  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 26 / 2015  
**Transaction ID : C10245746**  
Amount of Each Receipt this Period  
1000.00

**B. John Kluge**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1833 Crestview Dr  
City New Ulm State MN Zip Code 56073-3726  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 05 / 2015  
**Transaction ID : C10234624**  
Amount of Each Receipt this Period  
250.00

**C. Ross Kramer**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3750 Blackhawk Rd  
City Eagan State MN Zip Code 55122-1120  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Messerli & Kramer Occupation Attorney  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 12 / 2015  
**Transaction ID : C10237302**  
Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1750.00
<b>TOTAL</b> 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: (check only one)	PAGE 18 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)  
**A. Nancy Larson**

Mailing Address 21950 Cсах 4

City Dassel State MN Zip Code 55325-3641

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1435.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 06 / 2015  
**Transaction ID : C10235261**

Amount of Each Receipt this Period  
 35.00

Full Name (Last, First, Middle Initial)  
**B. Nancy Larson**

Mailing Address 21950 Cсах 4

City Dassel State MN Zip Code 55325-3641

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 ▼ 1435.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2015  
**Transaction ID : C10243424**

Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**C. Nancy Larson**

Mailing Address 21950 Cсах 4

City Dassel State MN Zip Code 55325-3641

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1435.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 20 / 2015  
**Transaction ID : C10242826**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 145.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. James Lenfestey**  
Full Name (Last, First, Middle Initial)

Mailing Address 1833 Girard Ave S

City Minneapolis State MN Zip Code 55403-2944

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Writer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
05 / 08 / 2015  
Transaction ID : C10236472

Amount of Each Receipt this Period  
1000.00

**B. John Lieske**  
Full Name (Last, First, Middle Initial)

Mailing Address 1910 S Payne St

City New Ulm State MN Zip Code 56073-3821

FEC ID number of contributing federal political committee. **C**

Name of Employer Mayo Clinic Occupation MD

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
05 / 21 / 2015  
Transaction ID : C10244295

Amount of Each Receipt this Period  
200.00

**C. Meg Litts**  
Full Name (Last, First, Middle Initial)

Mailing Address 213 Park Rd

City Staples State MN Zip Code 56479-3372

FEC ID number of contributing federal political committee. **C**

Name of Employer Discovery Woods Montessori School Occupation Educator/Leader

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
05 / 24 / 2015  
Transaction ID : C10245140

Amount of Each Receipt this Period  
35.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1235.00
<b>TOTAL</b> 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: (check only one)	PAGE 20 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Meg Litts**  
Full Name (Last, First, Middle Initial)  
Mailing Address 213 Park Rd  
City Staples State MN Zip Code 56479-3372  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Discovery Woods Montessori School Occupation Educator/Leader  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **320.00**

Date of Receipt  
**05 / 24 / 2015**  
Transaction ID : **C10245142**  
Amount of Each Receipt this Period  
**350.00**

**B. Becky Lourey**  
Full Name (Last, First, Middle Initial)  
Mailing Address 51752 Oak Leaf Rd  
City Kerrick State MN Zip Code 55756-3025  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Nemadji Research Corporation Occupation Owner  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  
**05 / 14 / 2015**  
Transaction ID : **C10238833**  
Amount of Each Receipt this Period  
**1000.00**

**C. Brent Malvick**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4877 W Arrowhead Rd Apt 104  
City Hermantown State MN Zip Code 55811-3909  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State of MN Occupation Judicial Law Clerk  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**05 / 08 / 2015**  
Transaction ID : **C10236326**  
Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional)..... **1285.00**  
**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: (check only one)	PAGE 21 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Jonathan Morgan**  
Full Name (Last, First, Middle Initial)

Mailing Address 1320 Riverside Ln  
Apt 303

City Mendota Heights State MN Zip Code 55118-1755

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt  
**05 / 04 / 2015**

**Transaction ID : C10234166**

Amount of Each Receipt this Period  
**50.00**

**B. Jonathan Morgan**  
Full Name (Last, First, Middle Initial)

Mailing Address 1320 Riverside Ln  
Apt 303

City Mendota Heights State MN Zip Code 55118-1755

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt  
**05 / 18 / 2015**

**Transaction ID : C10241367**

Amount of Each Receipt this Period  
**750.00**

**C. Darby Nelson**  
Full Name (Last, First, Middle Initial)

Mailing Address 1013 Vera St N

City Champlin State MN Zip Code 55316-1527

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**05 / 19 / 2015**

**Transaction ID : C10242715**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional)..... **1050.00**

**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: (check only one)	PAGE 22 OF 137
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial) <b>A. Betsy O'Berry</b>		Date of Receipt MM / DD / YYYY 05 / 07 / 2015 <b>Transaction ID : C10235757</b>
Mailing Address PO Box 876		Amount of Each Receipt this Period 1250.00
City Anoka	State MN	Zip Code 55303-0876
FEC ID number of contributing federal political committee. C		
Name of Employer Sannerud Savarese and Associates	Occupation CPA	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) <b>B. Cathy Olson</b>		Date of Receipt MM / DD / YYYY 05 / 23 / 2015 <b>Transaction ID : C10245111</b>
Mailing Address 3415 Warner Ln		Amount of Each Receipt this Period 250.00
City Minnetrista	State MN	Zip Code 55364-9264
FEC ID number of contributing federal political committee. C		
Name of Employer Boston Scientific	Occupation Program Director	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Alan Perish</b>		Date of Receipt MM / DD / YYYY 05 / 11 / 2015 <b>Transaction ID : C10236642</b>
Mailing Address 26092 County 14		Amount of Each Receipt this Period 1250.00
City Browerville	State MN	Zip Code 56438-4981
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2750.00
<b>TOTAL</b> 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: (check only one)	PAGE 23 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)  
**A. Lindsey Port**

Mailing Address 912 Crystal Lake Rd W

City Burnsville State MN Zip Code 55306-6166

FEC ID number of contributing federal political committee. **C**

Name of Employer Legion Supplies Occupation Co-Owner

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 12 / 2015  
**Transaction ID : C10237500**

Amount of Each Receipt this Period  
 250.00

Full Name (Last, First, Middle Initial)  
**B. Jeremy Powers**

Mailing Address 7373 Memory Ln NE

City Minneapolis State MN Zip Code 55432-3218

FEC ID number of contributing federal political committee. **C**

Name of Employer Self - Webitality Occupation Web Developer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 535.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 19 / 2015  
**Transaction ID : C10242286**

Amount of Each Receipt this Period  
 500.00

Full Name (Last, First, Middle Initial)  
**C. Jeremy Powers**

Mailing Address 7373 Memory Ln NE

City Minneapolis State MN Zip Code 55432-3218

FEC ID number of contributing federal political committee. **C**

Name of Employer Self - Webitality Occupation Web Developer

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 535.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2015  
**Transaction ID : C10245020**

Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 785.00

**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: (check only one)	PAGE 24 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Joe Radinovich**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 235

City Crosby State MN Zip Code 56441-0235

FEC ID number of contributing federal political committee. **C**

Name of Employer IRRRB Occupation Asst Director

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
05 / 11 / 2015  
**Transaction ID : C10236643**

Amount of Each Receipt this Period  
250.00

**B. Anita Root**  
Full Name (Last, First, Middle Initial)

Mailing Address 937 Grandview Ave W

City Roseville State MN Zip Code 55113-4536

FEC ID number of contributing federal political committee. **C**

Name of Employer Go Next Inc Occupation Product Development

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
05 / 04 / 2015  
**Transaction ID : C10234156**

Amount of Each Receipt this Period  
250.00

**C. Matt Samuel**  
Full Name (Last, First, Middle Initial)

Mailing Address 4166 Monterey Ave

City Edina State MN Zip Code 55416-5049

FEC ID number of contributing federal political committee. **C**

Name of Employer Fish & Richardson Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
05 / 19 / 2015  
**Transaction ID : C10242285**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)  
**A. Carol Suggs**

Mailing Address 27995 Boulder Cir

City State Zip Code  
Excelsior MN 55331-8312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2015  
**Transaction ID : C10241377**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Robert Tennesen**

Mailing Address 2522 Thomas Ave S

City State Zip Code  
Minneapolis MN 55405-2344

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 26 / 2015  
**Transaction ID : C10245755**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C. Barry Vornbrock**

Mailing Address PO Box 24473

City State Zip Code  
Edina MN 55424-0473

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self-Employed Consulting

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2015  
**Transaction ID : C10247158**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00

**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: (check only one)	PAGE 26 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Sarah Walker**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Robert St N  
Unit 611

City Saint Paul State MN Zip Code 55101-4456

FEC ID number of contributing federal political committee. **C**

Name of Employer Hill Capitol Strategies Occupation Government Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
05 / 13 / 2015  
**Transaction ID : C10242622**

Amount of Each Receipt this Period  
100.00

**B. Jo Ann Ward**  
Full Name (Last, First, Middle Initial)

Mailing Address 7817 Somerset Circle

City St Paul State MN Zip Code 55125

FEC ID number of contributing federal political committee. **C**

Name of Employer State of Minnesota Occupation State Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
05 / 05 / 2015  
**Transaction ID : C10242610**

Amount of Each Receipt this Period  
250.00

**C. John Bulbulian Wells**  
Full Name (Last, First, Middle Initial)

Mailing Address 3680 Knoll Ridge Dr

City Eagan State MN Zip Code 55122-1130

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2785.00

Date of Receipt  
05 / 23 / 2015  
**Transaction ID : C10245107**

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 2850.00

**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: (check only one)	PAGE 27 OF 137
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. John Bulbulian Wells**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3680 Knoll Ridge Dr  
 City Eagan State MN Zip Code 55122-1130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Consultant  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2785.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2015  
**Transaction ID : C10247550**  
 Amount of Each Receipt this Period  
 250.00

**B. Lynn Carlson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1255 Wilderness Run Rd  
 City Eagan State MN Zip Code 55123-1840  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Thomson Reuters Occupation Business Analyst  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2015  
**Transaction ID : C10257052A**  
 Amount of Each Receipt this Period  
 10.00  
 \* Earmarked Contribution: See Below

**C. ACTBLUE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 382110  
 City Cambridge State MA Zip Code 02238-2110  
 FEC ID number of contributing federal political committee. **C C00401224**  
 Name of Employer Occupation Conduit total listed in Agg. field  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1289.44

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 26 / 2015  
**Transaction ID : C10257052AB**  
 Amount of Each Receipt this Period  
 10.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	260.00
<b>TOTAL</b> 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: (check only one)	PAGE 28 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Barbara Duehn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2200 Wilson Dr.  
City Arlington State TX Zip Code 76011  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Not Employed Occupation Not Employed  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **05 / 01 / 2015**  
**Transaction ID : C10256882A**  
Amount of Each Receipt this Period **15.00**  
\* Earmarked Contribution: See Below

**B. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110  
City Cambridge State MA Zip Code 02238-2110  
FEC ID number of contributing federal political committee. **C C00401224**  
Name of Employer Occupation Conduit total listed in Agg. field  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **1289.44**

Date of Receipt **05 / 05 / 2015**  
**Transaction ID : C10256882AB**  
Amount of Each Receipt this Period **15.00**  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C. Barbara Duehn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2200 Wilson Dr.  
City Arlington State TX Zip Code 76011  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Not Employed Occupation Not Employed  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **05 / 01 / 2015**  
**Transaction ID : C10256883A**  
Amount of Each Receipt this Period **15.00**  
\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>30.00</b>
<b>TOTAL</b> 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: (check only one)	PAGE 29 OF 137
<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)  
**Minnesota Democratic-Farmer-Labor Party**

**A. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
	Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1289.44

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

**Transaction ID : C10256883AB**

Amount of Each Receipt this Period  

15.00
-------

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B. Barbara Duehn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2200 Wilson Dr.

City Arlington	State TX	Zip Code 76011
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Not Employed	Occupation Not Employed
	Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2015

**Transaction ID : C10256884A**

Amount of Each Receipt this Period  

15.00
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\* Earmarked Contribution: See Below

**C. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation
	Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1289.44

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

**Transaction ID : C10256884AB**

Amount of Each Receipt this Period  

15.00
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**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15.00
<b>TOTAL</b> 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: (check only one)	PAGE 30 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Barbara Duehn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2200 Wilson Dr.  
City Arlington State TX Zip Code 76011  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Not Employed Occupation Not Employed  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**05 / 01 / 2015**  
**Transaction ID : C10256926A**  
Amount of Each Receipt this Period  
**15.00**  
\* Earmarked Contribution: See Below

**B. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110  
City Cambridge State MA Zip Code 02238-2110  
FEC ID number of contributing federal political committee. **C C00401224**  
Name of Employer Occupation Conduit total listed in Agg. field  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **1289.44**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**05 / 05 / 2015**  
**Transaction ID : C10256926AB**  
Amount of Each Receipt this Period  
**15.00**  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**c. Barbara Duehn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2200 Wilson Dr.  
City Arlington State TX Zip Code 76011  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Not Employed Occupation Not Employed  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**05 / 01 / 2015**  
**Transaction ID : C10256945A**  
Amount of Each Receipt this Period  
**15.00**  
\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>30.00</b>
<b>TOTAL</b> 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: (check only one)	PAGE 31 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)  
**A. ACTBLUE**

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1289.44**

Date of Receipt **05 / 05 / 2015**

**Transaction ID : C10256945AB**

Amount of Each Receipt this Period **15.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. Barbara Duehn**

Mailing Address **2200 Wilson Dr.**

City **Arlington** State **TX** Zip Code **76011**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Not Employed** Occupation **Not Employed**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **05 / 01 / 2015**

**Transaction ID : C10256947A**

Amount of Each Receipt this Period **15.00**

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1289.44**

Date of Receipt **05 / 05 / 2015**

**Transaction ID : C10256947AB**

Amount of Each Receipt this Period **15.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>15.00</b>
<b>TOTAL</b> 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: (check only one)	PAGE 32 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Barbara Duehn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2200 Wilson Dr.  
City Arlington State TX Zip Code 76011  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Not Employed Occupation Not Employed  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**05 / 01 / 2015**  
**Transaction ID : C10256949A**  
Amount of Each Receipt this Period  
**15.00**  
\* Earmarked Contribution: See Below

**B. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110  
City Cambridge State MA Zip Code 02238-2110  
FEC ID number of contributing federal political committee. **C C00401224**  
Name of Employer Occupation Conduit total listed in Agg. field  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **1289.44**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**05 / 05 / 2015**  
**Transaction ID : C10256949AB**  
Amount of Each Receipt this Period  
**15.00**  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**c. Barbara Duehn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2200 Wilson Dr.  
City Arlington State TX Zip Code 76011  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Not Employed Occupation Not Employed  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**05 / 01 / 2015**  
**Transaction ID : C10256950A**  
Amount of Each Receipt this Period  
**15.00**  
\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>30.00</b>
<b>TOTAL</b> 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: (check only one)	PAGE 33 OF 137
<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)  
**Minnesota Democratic-Farmer-Labor Party**

**A. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1289.44

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 05 / 2015  
**Transaction ID : C10256950AB**

Amount of Each Receipt this Period  
15.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B. Barbara Duehn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2200 Wilson Dr.

City Arlington	State TX	Zip Code 76011
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Not Employed Not Employed

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 01 / 2015  
**Transaction ID : C10256953A**

Amount of Each Receipt this Period  
15.00

\* Earmarked Contribution: See Below

**C. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110

City Cambridge	State MA	Zip Code 02238-2110
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1289.44

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 05 / 2015  
**Transaction ID : C10256953AB**

Amount of Each Receipt this Period  
15.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15.00
<b>TOTAL</b> 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: (check only one)	PAGE 34 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)  
**A. Barbara Duehn**

Mailing Address 2200 Wilson Dr.

City State Zip Code  
Arlington TX 76011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Not Employed Not Employed

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2015

**Transaction ID : C10256955A**

Amount of Each Receipt this Period  
15.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1289.44

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 05 / 2015

**Transaction ID : C10256955AB**

Amount of Each Receipt this Period  
15.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**c. Barbara Duehn**

Mailing Address 2200 Wilson Dr.

City State Zip Code  
Arlington TX 76011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Not Employed Not Employed

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2015

**Transaction ID : C10256956A**

Amount of Each Receipt this Period  
15.00

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> 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: (check only one)	PAGE 35 OF 137
<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

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)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)  
**A. ACTBLUE**

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1289.44**

Date of Receipt  
**05 / 05 / 2015**

**Transaction ID : C10256956AB**

Amount of Each Receipt this Period  
**15.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. Barbara Duehn**

Mailing Address **2200 Wilson Dr.**

City **Arlington** State **TX** Zip Code **76011**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Not Employed** Occupation **Not Employed**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  
**05 / 01 / 2015**

**Transaction ID : C10256987A**

Amount of Each Receipt this Period  
**15.00**

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1289.44**

Date of Receipt  
**05 / 05 / 2015**

**Transaction ID : C10256987AB**

Amount of Each Receipt this Period  
**15.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>15.00</b>
<b>TOTAL</b> 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: (check only one)	PAGE 36 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Barbara Duehn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2200 Wilson Dr.  
City Arlington State TX Zip Code 76011  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Not Employed Occupation Not Employed  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 01 / 2015  
**Transaction ID : C10256988A**  
Amount of Each Receipt this Period 15.00  
\* Earmarked Contribution: See Below

**B. ACTBLUE**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 382110  
City Cambridge State MA Zip Code 02238-2110  
FEC ID number of contributing federal political committee. **C** C00401224  
Name of Employer Occupation Conduit total listed in Agg. field  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 1289.44

Date of Receipt 05 / 05 / 2015  
**Transaction ID : C10256988AB**  
Amount of Each Receipt this Period 15.00  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**c. Barbara Duehn**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2200 Wilson Dr.  
City Arlington State TX Zip Code 76011  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Not Employed Occupation Not Employed  
Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 01 / 2015  
**Transaction ID : C10257003A**  
Amount of Each Receipt this Period 15.00  
\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.00  
**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: (check only one)	PAGE 37 OF 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)  
**A. ACTBLUE**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1289.44

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 05 / 2015  
**Transaction ID : C10257003AB**

Amount of Each Receipt this Period  
15.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

Full Name (Last, First, Middle Initial)  
**B. Charles Stander**

Mailing Address 574 Summit

City St. Paul State MN Zip Code 55102-3669

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Not employed Not employed

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 07 / 2015  
**Transaction ID : C10257035A**

Amount of Each Receipt this Period  
35.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1289.44

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 19 / 2015  
**Transaction ID : C10257035AB**

Amount of Each Receipt this Period  
35.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35.00
<b>TOTAL</b> This Period (last page this line number only).....▶	22600.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 OF 137  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Democratic National Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 S Capitol St SE  
 City Washington State DC Zip Code 20003-4024  
 FEC ID number of contributing federal political committee. **C** C00010603  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 41100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 30 / 2015  
**Transaction ID : C10257072**  
 Amount of Each Receipt this Period  
 3220.00  
 \* In-Kind: Voter File Access

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3220.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3220.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 137
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)  
**A. Nolan for Congress Committee**

Mailing Address Po Box 1041

City Brainerd State MN Zip Code 56401

FEC ID number of contributing federal political committee. **C C00499053**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
14285.80

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 14 / 2015  
**Transaction ID : C10242598**

Amount of Each Receipt this Period  
7627.00

Excess Funds Transfer

Full Name (Last, First, Middle Initial)  
**B. Peterson for US Congress**

Mailing Address 26192 FLOYD LAKE POINT ROAD

City DETROIT LAKES State MN Zip Code 56501

FEC ID number of contributing federal political committee. **C C00253187**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
9389.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2015  
**Transaction ID : C10243426**

Amount of Each Receipt this Period  
2500.00

Excess Funds Transfer

Full Name (Last, First, Middle Initial)  
**C. Peterson for US Congress**

Mailing Address 26192 FLOYD LAKE POINT ROAD

City DETROIT LAKES State MN Zip Code 56501

FEC ID number of contributing federal political committee. **C C00253187**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
9389.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2015  
**Transaction ID : C10243427**

Amount of Each Receipt this Period  
6889.00

Excess Funds Transfer

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	17016.00
<b>TOTAL</b> This Period (last page this line number only).....▶	17016.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 40 OF 137
<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)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial) <b>A. Democratic National Committee</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 20 / 2015 <b>Transaction ID : C10250030</b>
Mailing Address 430 S Capitol St SE		Amount of Each Receipt this Period 5000.00
City Washington	State DC	Zip Code 20003-4024
FEC ID number of contributing federal political committee. C C00010603		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 41100.00	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 OF 137
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. United States Treasury**

Full Name (Last, First, Middle Initial)  
Mailing Address Withholding Taxes

City Ogden State UT Zip Code 84201-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1372.31

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 13 / 2015

**Transaction ID : C10242623**

Amount of Each Receipt this Period  
837.10

100% Federal Tax Refund

**B.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	837.10
<b>TOTAL</b> This Period (last page this line number only).....▶	837.10

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 42 OF 137
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A. Drake Bank Federal**  
Full Name (Last, First, Middle Initial)  
Mailing Address 60 Plato Blvd E  
City Saint Paul State MN Zip Code 55107-1820  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 175035.44

Date of Receipt 05 / 31 / 2015  
**Transaction ID : C10250034**  
Amount of Each Receipt this Period 1.51  
\* Interest

**B. Drake Bank Federal**  
Full Name (Last, First, Middle Initial)  
Mailing Address 60 Plato Blvd E  
City Saint Paul State MN Zip Code 55107-1820  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 175035.44

Date of Receipt 05 / 31 / 2015  
**Transaction ID : C10250035**  
Amount of Each Receipt this Period 0.02  
\* Interest

**C. Minnesota Department of Revenue- State Checkoff**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 821  
City Minneapolis State MN Zip Code 55440-0821  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2016  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 28852.68

Date of Receipt 05 / 14 / 2015  
**Transaction ID : C10242599**  
Amount of Each Receipt this Period 12014.10  
State Tax Checkoff

**SUBTOTAL** of Receipts This Page (optional).....▶ 12015.63  
**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 43 OF 137  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

**A.** Full Name (Last, First, Middle Initial)  
**VLM Cooperative Inc**

Mailing Address **PO Box 9**

City Lexington State KY Zip Code 40588-0009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 5465.64

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 26 / 2015**

**Transaction ID : C10245673**

Amount of Each Receipt this Period  
 1020.05

Proceeds from License of Voter File

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1020.05
<b>TOTAL</b> This Period (last page this line number only).....▶	13035.68

**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)

<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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. ACTBLUE**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Actblue Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 05 / 2015

**Transaction ID : D575390**

Amount of Each Disbursement this Period

24.17

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. ACTBLUE**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Actblue Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 05 / 2015

**Transaction ID : D575391**

Amount of Each Disbursement this Period

1.93

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. ACTBLUE**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Actblue Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2015

**Transaction ID : D575392**

Amount of Each Disbursement this Period

1.13

Category/  
Type

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

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

27.23

**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. ACTBLUE**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Actblue Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 19 / 2015

**Transaction ID : D575393**

Amount of Each Disbursement this Period

16.36

Full Name (Last, First, Middle Initial)

**B. ACTBLUE**

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

Purpose of Disbursement  
Actblue Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 26 / 2015

**Transaction ID : D575394**

Amount of Each Disbursement this Period

11.41

Full Name (Last, First, Middle Initial)

**C. Adam Carr**

Mailing Address 19834 Jaguar Ave

City Lakeville State MN Zip Code 55044

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2015

**Transaction ID : D575336**

Amount of Each Disbursement this Period

1376.54

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

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

1404.31

**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)

<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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Adam Carr**

Mailing Address 19834 Jaguar Ave

City Lakeville State MN Zip Code 55044

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575208**

Amount of Each Disbursement this Period

1376.54

Full Name (Last, First, Middle Initial)

**B. Adam Carr**

Mailing Address 19834 Jaguar Ave

City Lakeville State MN Zip Code 55044

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

**Transaction ID : D575230**

Amount of Each Disbursement this Period

1376.54

Full Name (Last, First, Middle Initial)

**C. Anne Lewis Strategies LLC**

Mailing Address 2801 M St NW

City Washington State DC Zip Code 20007-3712

Purpose of Disbursement  
Email Consultant

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 21 / 2015

**Transaction ID : D574902**

Amount of Each Disbursement this Period

6000.00

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

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

8753.08

**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. AXA Equitable**

Mailing Address PO Box 13463

City Newark State NJ Zip Code 07188

Purpose of Disbursement Retirement Funds

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 07 / 2015

**Transaction ID : D575225**

Amount of Each Disbursement this Period

1592.90

Full Name (Last, First, Middle Initial)

**B. Cheryl Kaliszewski**

Mailing Address 1458 Hazelwood St

City Saint Paul State MN Zip Code 55106

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

**Transaction ID : D575244**

Amount of Each Disbursement this Period

279.72

Full Name (Last, First, Middle Initial)

**C. Cheryl Kaliszewski**

Mailing Address 1458 Hazelwood St

City Saint Paul State MN Zip Code 55106

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575175**

Amount of Each Disbursement this Period

240.06

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

2112.68

**TOTAL** This Period (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)

<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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Cheryl Kaliszewski**

Mailing Address 1458 Hazelwood St

City State Zip Code  
Saint Paul MN 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2015

**Transaction ID : D575324**

Amount of Each Disbursement this Period

378.21

Full Name (Last, First, Middle Initial)

**B. Curtis Shelmon**

Mailing Address 554 Central Ave W #909

City State Zip Code  
Saint Paul MN 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2015

**Transaction ID : D575337**

Amount of Each Disbursement this Period

1189.70

Full Name (Last, First, Middle Initial)

**C. Curtis Shelmon**

Mailing Address 554 Central Ave W #909

City State Zip Code  
Saint Paul MN 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

**Transaction ID : D575231**

Amount of Each Disbursement this Period

1189.69

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

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

2757.60



**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Curtis Shelmon**

Mailing Address 554 Central Ave W #909

City State Zip Code  
Saint Paul MN 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /   
05 / 01 / 2015

**Transaction ID : D575209**

Amount of Each Disbursement this Period

1189.70

Full Name (Last, First, Middle Initial)

**B. Joshua Davis**

Mailing Address 27556 Flintwod St NW

City State Zip Code  
Isanti MN 55040

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /   
05 / 15 / 2015

**Transaction ID : D575241**

Amount of Each Disbursement this Period

151.68

Full Name (Last, First, Middle Initial)

**C. Joshua Davis**

Mailing Address 27556 Flintwod St NW

City State Zip Code  
Isanti MN 55040

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /   
05 / 01 / 2015

**Transaction ID : D575170**

Amount of Each Disbursement this Period

121.10

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

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

1462.48

**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Joshua Davis**

Mailing Address 27556 Flintwod St NW

City Isanti State MN Zip Code 55040

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		29		2015

**Transaction ID : D575321**

Amount of Each Disbursement this Period

48.58
-------

Full Name (Last, First, Middle Initial)

**B. Corey Day**

Mailing Address 3518 Nicollet Ave #203

City Minneapolis State MN Zip Code 55408-4575

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		15		2015

**Transaction ID : D575255**

Amount of Each Disbursement this Period

2281.78
---------

Full Name (Last, First, Middle Initial)

**C. Corey Day**

Mailing Address 3518 Nicollet Ave #203

City Minneapolis State MN Zip Code 55408-4575

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		29		2015

**Transaction ID : D575306**

Amount of Each Disbursement this Period

2281.79
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

4612.15
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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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Corey Day**

Mailing Address 3518 Nicollet Ave #203

City Minneapolis State MN Zip Code 55408-4575

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575205**

Amount of Each Disbursement this Period

2281.77

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Democratic National Committee**

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement  
Voter File Access

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 30 / 2015

**Transaction ID : D575395**

Amount of Each Disbursement this Period

3220.00

Category/  
Type

\* In-Kind Received

Full Name (Last, First, Middle Initial)

**C. R Scott Dickman**

Mailing Address 215 Oak Grove St Apt 1111

City Minneapolis State MN Zip Code 55403-3353

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2015

**Transaction ID : D575316**

Amount of Each Disbursement this Period

220.27

Category/  
Type

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

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

5722.04

**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 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)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. R Scott Dickman**

Mailing Address 215 Oak Grove St Apt 1111

City Minneapolis State MN Zip Code 55403-3353

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

**Transaction ID : D575237**

Amount of Each Disbursement this Period

89.97

Full Name (Last, First, Middle Initial)

**B. R Scott Dickman**

Mailing Address 215 Oak Grove St Apt 1111

City Minneapolis State MN Zip Code 55403-3353

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575166**

Amount of Each Disbursement this Period

329.93

Full Name (Last, First, Middle Initial)

**C. Drake Bank Federal**

Mailing Address 60 Plato Blvd E

City Saint Paul State MN Zip Code 55107-1820

Purpose of Disbursement  
Loan Interest

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D574907**

Amount of Each Disbursement this Period

1254.16

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

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

1674.06

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

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

FOR LINE NUMBER:  
(check only one)

<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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. EFTPS Fed Tax Payment**

Mailing Address Federal Withholding Taxes

City Iowa City State IA Zip Code 52244

Purpose of Disbursement  
Federal Withholding Tax

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2015

**Transaction ID : D575223**

Amount of Each Disbursement this Period

4935.42

Full Name (Last, First, Middle Initial)

**B. EFTPS Fed Tax Payment**

Mailing Address Federal Withholding Taxes

City Iowa City State IA Zip Code 52244

Purpose of Disbursement  
Federal Withholding Tax

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2015

**Transaction ID : D575265**

Amount of Each Disbursement this Period

4984.66

Full Name (Last, First, Middle Initial)

**C. Estelle Jones**

Mailing Address 1600 Case Ave

City Saint Paul State MN Zip Code 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2015

**Transaction ID : D575323**

Amount of Each Disbursement this Period

219.01

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

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

10139.09

**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Estelle Jones**

Mailing Address 1600 Case Ave

City State Zip Code  
Saint Paul MN 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

**Transaction ID : D575243**

Amount of Each Disbursement this Period

188.59

Full Name (Last, First, Middle Initial)

**B. Estelle Jones**

Mailing Address 1600 Case Ave

City State Zip Code  
Saint Paul MN 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575174**

Amount of Each Disbursement this Period

202.52

Full Name (Last, First, Middle Initial)

**C. Berrett Gall**

Mailing Address 150 Portland Ave  
Unit 305

City State Zip Code  
Minneapolis MN 55401-2621

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

**Transaction ID : D575228**

Amount of Each Disbursement this Period

2161.04

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

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

2552.15

**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Berrett Gall**

Mailing Address 150 Portland Ave  
Unit 305

City Minneapolis State MN Zip Code 55401-2621

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D575206**

Amount of Each Disbursement this Period

**B. Berrett Gall**

Mailing Address 150 Portland Ave  
Unit 305

City Minneapolis State MN Zip Code 55401-2621

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D575307**

Amount of Each Disbursement this Period

**C. Georgia Ales-Lynch**

Mailing Address 1320 Smith Ave S

City Saint Paul State MN Zip Code 55118

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D575317**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Georgia Ales-Lynch**

Mailing Address 1320 Smith Ave S

City State Zip Code  
Saint Paul MN 55118

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

**Transaction ID : D575238**

Amount of Each Disbursement this Period

300.33

Full Name (Last, First, Middle Initial)

**B. Georgia Ales-Lynch**

Mailing Address 1320 Smith Ave S

City State Zip Code  
Saint Paul MN 55118

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575167**

Amount of Each Disbursement this Period

269.24

Full Name (Last, First, Middle Initial)

**C. HealthPartners**

Mailing Address 8170 33rd Ave S

City State Zip Code  
Bloomington MN 55425-4516

Purpose of Disbursement  
Health Insurance

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 27 / 2015

**Transaction ID : D574899**

Amount of Each Disbursement this Period

2278.17

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

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

2847.74



**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. John Laws**

Mailing Address 658 Thomas Ave

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

**Transaction ID : D575246**

Amount of Each Disbursement this Period

129.10

Category/Type

Full Name (Last, First, Middle Initial)

**B. John Laws**

Mailing Address 658 Thomas Ave

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2015

**Transaction ID : D575326**

Amount of Each Disbursement this Period

327.11

Category/Type

Full Name (Last, First, Middle Initial)

**C. Juannell Johnson**

Mailing Address 478 Hazel St N

City Saint Paul State MN Zip Code 55119

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575173**

Amount of Each Disbursement this Period

208.71

Category/Type

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

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

664.92

**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Keith Deckert**

Mailing Address 286 Van Buren Ave Apt 2

City State Zip Code  
Saint Paul MN 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D575171**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Keith Deckert**

Mailing Address 286 Van Buren Ave Apt 2

City State Zip Code  
Saint Paul MN 55103

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D575322**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Terry Kelley**

Mailing Address 5649 Perry Ave N

City State Zip Code  
Minneapolis MN 55429-2828

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : D575325**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Terry Kelley**

Mailing Address 5649 Perry Ave N

City Minneapolis State MN Zip Code 55429-2828

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		15		2015

**Transaction ID : D575245**

Amount of Each Disbursement this Period

103.85
--------

Full Name (Last, First, Middle Initial)

**B. Terry Kelly**

Mailing Address 514 Park Valley Dr W

City Hopkins State MN Zip Code 55343-7739

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2015

**Transaction ID : D575176**

Amount of Each Disbursement this Period

163.49
--------

Full Name (Last, First, Middle Initial)

**C. Heidi Kraus Kaplan**

Mailing Address 2603 Newton Ave S

City Minneapolis State MN Zip Code 55405-2436

Purpose of Disbursement  
Airfare, Lodging for Guest Speaker at Training Summitt

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		13		2015

**Transaction ID : D574890**

Amount of Each Disbursement this Period

1147.34
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1414.68
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: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: **SB21B**

Transaction ID : **D574890**

5/11/2015 United Airlines, PO Box 06649, Chicago, Ill 60606, Airfare, \$729.20. 5/11/2015 St Paul Hotel, 350 Market St, St Paul, MN 55102, Lodging, \$418.14.

Form/Schedule:

Transaction ID:

**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Layton Smith**

Mailing Address 2732 2nd Ave S

City Minneapolis State MN Zip Code 55406

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

**Transaction ID : D575253**

Amount of Each Disbursement this Period

331.14

Full Name (Last, First, Middle Initial)

**B. Layton Smith**

Mailing Address 2732 2nd Ave S

City Minneapolis State MN Zip Code 55406

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575201**

Amount of Each Disbursement this Period

285.00

Full Name (Last, First, Middle Initial)

**C. Layton Smith**

Mailing Address 2732 2nd Ave S

City Minneapolis State MN Zip Code 55406

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2015

**Transaction ID : D575334**

Amount of Each Disbursement this Period

263.70

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

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

879.84

**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Leola Brown**

Mailing Address 2359 12th Ave E

City State Zip Code  
Saint Paul MN 55109

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		29		2015

**Transaction ID : D575319**

Amount of Each Disbursement this Period

198.00
--------

Full Name (Last, First, Middle Initial)

**B. Christopher Lundgren**

Mailing Address 1573 Cohansey St #203

City State Zip Code  
Saint Paul MN 55117

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2015

**Transaction ID : D575178**

Amount of Each Disbursement this Period

65.38
-------

Full Name (Last, First, Middle Initial)

**C. Brittany Mann**

Mailing Address 3396 Yankee Doodle LN #212

City State Zip Code  
Saint Paul MN 55121

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2015

**Transaction ID : D575180**

Amount of Each Disbursement this Period

162.72
--------

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

426.10
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**TOTAL** This Period (last page this line number only)..... ▶

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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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Brittany Mann**

Mailing Address 3396 Yankee Doodle LN #212

City State Zip Code  
Saint Paul MN 55121

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2015

**Transaction ID : D575249**

Amount of Each Disbursement this Period

95.12
-------

Full Name (Last, First, Middle Initial)

**B. Brittany Mann**

Mailing Address 3396 Yankee Doodle LN #212

City State Zip Code  
Saint Paul MN 55121

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2015

**Transaction ID : D575329**

Amount of Each Disbursement this Period

82.19
-------

Full Name (Last, First, Middle Initial)

**C. Ken Martin**

Mailing Address 4104 Oakbrooke Curv

City State Zip Code  
Eagan MN 55122-4217

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2015

**Transaction ID : D575308**

Amount of Each Disbursement this Period

2873.46
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3050.77
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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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Ken Martin**

Mailing Address 4104 Oakbrooke Curv

City Eagan State MN Zip Code 55122-4217

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575207**

Amount of Each Disbursement this Period

2873.46

Full Name (Last, First, Middle Initial)

**B. Ken Martin**

Mailing Address 4104 Oakbrooke Curv

City Eagan State MN Zip Code 55122-4217

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

**Transaction ID : D575229**

Amount of Each Disbursement this Period

2873.46

Full Name (Last, First, Middle Initial)

**C. Ken Martin**

Mailing Address 4104 Oakbrooke Curv

City Eagan State MN Zip Code 55122-4217

Purpose of Disbursement  
Fundraising Lunch & Travel Expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 19 / 2015

**Transaction ID : D574905**

Amount of Each Disbursement this Period

980.16

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

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

6727.08



: 97 `A -G7 9 @ @ B9 CI G`H9 LH`F9 @ H98 `HC `5 `F9 DCFH`ZG7 <98 I @ `CF `H9 A -N5 H-CB

Form/Schedule: SB21B

Transaction ID : D574905

4/1/2015, 4/3/2015, 4/6/2015 Downtowner, 253 W 7th St, St Paul, MN 55102, Fundraising Lunch, \$27.28, \$40.25, \$30.35. 4/1/2015 , 4/14/2015 Louisiana Cafe, 613 Selby Ave, St Paul, MN 55102, Fundraising Lunch, \$25.67, \$19.53. 4/9/2015 Bulldog, 237 6th St E, St Paul, MN 55101, Fundraising Lunch, \$22.40. 4/27/2015 Brandy Hunan Food, 217 Columbus Ave, San Francisco, CA 94133, Staff Meal, \$87.33. 4/27/2015 Yellow Car Service, 1200 Mississippi St, San Fran, CA 94133, Taxi, \$58.75. 4/27/2015 Cocina Del Barrio, 7150 Humphrey Dr, Mpls, MN 55450, Staff Meal, \$71.55. 4/27/2015, 5/1/2015 Sun Country Airline, 1300 Mendota Heights Rd, Mendota Heights, MN 55102, Baggage Fee, \$25.00, \$25.00. 4/29/2015, Mangos, 255 39 Pier, San Fran, CA 94133, Staff Meal, \$76.83. 4/29/2015 Elite Transport, 221 King St, San Fran, CA 94107, Transportation, \$14.75. 4/29/2015 Comfort Cab, 999 Pennsylvania Ave, San Fran, CA 94107, Taxi, \$21.35. 4/30/2015, 5/1/2015, Luxor Cab, 2230 Jerold Ave, San Fran, CA 94124, \$11.00, \$55.00. 5/1/2015 Tarantinos, 206 Jefferson St, San Fran, CA 94133, Staff Meals, \$101.09. 5/1/2015 Airport Cab, 1841 Ulysses Ave, Mpls, MN 55417, Taxi, \$57.20. 5/1/2015 Uber, 1455 Market St, San Fran, CA 94107, Taxi, \$198.83. 4/20/2015 Standard Parking, 50 Sixth St, Mpls, MN 55402, Parking, \$11.00.

Form/Schedule:

Transaction ID:

**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Matthew Leavitt**

Mailing Address 2525 Harriet Ave S #319

City Minneapolis State MN Zip Code 55405

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575177**

Amount of Each Disbursement this Period

360.38

Full Name (Last, First, Middle Initial)

**B. Matthew Leavitt**

Mailing Address 2525 Harriet Ave S #319

City Minneapolis State MN Zip Code 55405

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

**Transaction ID : D575247**

Amount of Each Disbursement this Period

263.31

Full Name (Last, First, Middle Initial)

**C. Matthew Leavitt**

Mailing Address 2525 Harriet Ave S #319

City Minneapolis State MN Zip Code 55405

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2015

**Transaction ID : D575327**

Amount of Each Disbursement this Period

69.03

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

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

692.72

**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Michael Magistad**

Mailing Address 1573 Cohansey #203

City State Zip Code  
Saint Paul MN 55117

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

**Transaction ID : D575328**

Amount of Each Disbursement this Period

9	6	.	7	8
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Michael Magistad**

Mailing Address 1573 Cohansey #203

City State Zip Code  
Saint Paul MN 55117

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

**Transaction ID : D575248**

Amount of Each Disbursement this Period

8	4	.	9	6
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Michael Magistad**

Mailing Address 1573 Cohansey #203

City State Zip Code  
Saint Paul MN 55117

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

**Transaction ID : D575179**

Amount of Each Disbursement this Period

1	5	2	.	3	8
---	---	---	---	---	---

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

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

3	3	4	.	1	2
---	---	---	---	---	---

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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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Minnesota Child Support Payment Center**

Mailing Address PO Box 64306

City State Zip Code  
Saint Paul MN 55164-0306

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575217**

Amount of Each Disbursement this Period

24.91

Full Name (Last, First, Middle Initial)

**B. Minnesota Child Support Payment Center**

Mailing Address PO Box 64306

City State Zip Code  
Saint Paul MN 55164-0306

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575218**

Amount of Each Disbursement this Period

43.19

Full Name (Last, First, Middle Initial)

**C. Minnesota Child Support Payment Center**

Mailing Address PO Box 64306

City State Zip Code  
Saint Paul MN 55164-0306

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2015

**Transaction ID : D575338**

Amount of Each Disbursement this Period

24.91

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

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

93.01

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

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

FOR LINE NUMBER:  
(check only one)

<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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Minnesota Child Support Payment Center**

Mailing Address PO Box 64306

City State Zip Code  
Saint Paul MN 55164-0306

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

**Transaction ID : D575339**

Amount of Each Disbursement this Period

4	3	.	1	9
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Minnesota Child Support Payment Center**

Mailing Address PO Box 64306

City State Zip Code  
Saint Paul MN 55164-0306

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

**Transaction ID : D575258**

Amount of Each Disbursement this Period

2	4	.	9	1
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Minnesota Child Support Payment Center**

Mailing Address PO Box 64306

City State Zip Code  
Saint Paul MN 55164-0306

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

**Transaction ID : D575259**

Amount of Each Disbursement this Period

4	3	.	1	9
---	---	---	---	---

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

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

1	1	.	1	1	9
---	---	---	---	---	---

		.			
--	--	---	--	--	--

**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Minnesota Department of Revenue**

Mailing Address PO Box 821

City Minneapolis State MN Zip Code 55440-0821

Purpose of Disbursement  
State Withholding Tax

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

**Transaction ID : D575262**

Amount of Each Disbursement this Period

758.00

Full Name (Last, First, Middle Initial)

**B. Minnesota Department of Revenue**

Mailing Address PO Box 821

City Minneapolis State MN Zip Code 55440-0821

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575220**

Amount of Each Disbursement this Period

87.38

Full Name (Last, First, Middle Initial)

**C. Minnesota Department of Revenue**

Mailing Address PO Box 821

City Minneapolis State MN Zip Code 55440-0821

Purpose of Disbursement  
State Withholding Tax

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 04 / 2015

**Transaction ID : D575222**

Amount of Each Disbursement this Period

760.00

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

1605.38

**TOTAL** This Period (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)

<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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

### A. Principal Life

Mailing Address PO Box 14416

City Des Moines State IA Zip Code 50306-3416

Purpose of Disbursement  
Dental & Life Insurance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 27 / 2015

Transaction ID : D574898

Amount of Each Disbursement this Period

323.78

Full Name (Last, First, Middle Initial)

### B. Larry Reeves

Mailing Address 1599 Saint Anthony Ave  
Apt 9

City Saint Paul State MN Zip Code 55104-3813

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

Transaction ID : D575182

Amount of Each Disbursement this Period

170.50

Full Name (Last, First, Middle Initial)

### C. Larry Reeves

Mailing Address 1599 Saint Anthony Ave  
Apt 9

City Saint Paul State MN Zip Code 55104-3813

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

Transaction ID : D575251

Amount of Each Disbursement this Period

285.56

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

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

779.84



# 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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

### A. Larry Reeves

Mailing Address 1599 Saint Anthony Ave  
Apt 9

City Saint Paul State MN Zip Code 55104-3813

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2015

Transaction ID : D575332

Amount of Each Disbursement this Period

286.87

Full Name (Last, First, Middle Initial)

### B. Reginald N Birts

Mailing Address 395 Luella St N Apt 314

City Saint Paul State MN Zip Code 55119-4324

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2015

Transaction ID : D575318

Amount of Each Disbursement this Period

284.44

Full Name (Last, First, Middle Initial)

### C. Reginald N Birts

Mailing Address 395 Luella St N Apt 314

City Saint Paul State MN Zip Code 55119-4324

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

Transaction ID : D575239

Amount of Each Disbursement this Period

221.66

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

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

792.97

**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Reginald N Birts**

Mailing Address 395 Luella St N Apt 314

City Saint Paul State MN Zip Code 55119-4324

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

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

**Transaction ID : D575168**

Amount of Each Disbursement this Period

2	1	.	6	8
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Richard Copeland**

Mailing Address 2732 2nd Ave S

City Minneapolis State MN Zip Code 55408

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

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

**Transaction ID : D575169**

Amount of Each Disbursement this Period

1	4	.	7	2	1
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Richard Copeland**

Mailing Address 2732 2nd Ave S

City Minneapolis State MN Zip Code 55408

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  Primary  General  Other (specify) ▼

Date of Disbursement

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

**Transaction ID : D575240**

Amount of Each Disbursement this Period

2	0	.	0	9	5
---	---	---	---	---	---

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

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

3	6	.	9	.	8	4
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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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Richard Copeland**

Mailing Address 2732 2nd Ave S

City Minneapolis State MN Zip Code 55408

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2015

**Transaction ID : D575320**

Amount of Each Disbursement this Period

336.89

Full Name (Last, First, Middle Initial)

**B. Sara Rivera**

Mailing Address 806 Earl St #1

City Saint Paul State MN Zip Code 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2015

**Transaction ID : D575333**

Amount of Each Disbursement this Period

401.23

Full Name (Last, First, Middle Initial)

**C. Sara Rivera**

Mailing Address 806 Earl St #1

City Saint Paul State MN Zip Code 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2015

**Transaction ID : D575252**

Amount of Each Disbursement this Period

171.95

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

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

910.07

**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Sara Rivera**

Mailing Address 806 Earl St #1

City State Zip Code  
Saint Paul MN 55106

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575183**

Amount of Each Disbursement this Period

299.99

Full Name (Last, First, Middle Initial)

**B. Seven Corners Printing**

Mailing Address 1099 Snelling Ave N

City State Zip Code  
Saint Paul MN 55108-2705

Purpose of Disbursement  
Fundraising Printing, County Fair Posters and Handouts

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 19 / 2015

**Transaction ID : D574904**

Amount of Each Disbursement this Period

4225.56

Full Name (Last, First, Middle Initial)

**C. Shonda James-Ofili**

Mailing Address 489 Geneva Ave N

City State Zip Code  
Saint Paul MN 55128

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575172**

Amount of Each Disbursement this Period

20.36

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

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

4545.91

**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Shonda James-Ofili**

Mailing Address 489 Geneva Ave N

City State Zip Code  
Saint Paul MN 55128

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

**Transaction ID : D575242**

Amount of Each Disbursement this Period

85.79

Full Name (Last, First, Middle Initial)

**B. Cassandra Tommerdahl**

Mailing Address 2802 Granada Ave N

City State Zip Code  
Oakdale MN 55128-3501

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575202**

Amount of Each Disbursement this Period

31.95

Full Name (Last, First, Middle Initial)

**C. Toni Wiegert**

Mailing Address 400 Larpenteur Ave

City State Zip Code  
Saint Paul MN 55113

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575204**

Amount of Each Disbursement this Period

351.12

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

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

468.86

**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Toni Wiegert**

Mailing Address 400 Larpenteur Ave

City State Zip Code  
Saint Paul MN 55113

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

**Transaction ID : D575254**

Amount of Each Disbursement this Period

350.74

**B. Toni Wiegert**

Full Name (Last, First, Middle Initial)

Mailing Address 400 Larpenteur Ave

City State Zip Code  
Saint Paul MN 55113

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2015

**Transaction ID : D575335**

Amount of Each Disbursement this Period

449.93

**C. Trezhaun Wheat**

Full Name (Last, First, Middle Initial)

Mailing Address 464 Maryland Ave W

City State Zip Code  
Saint Paul MN 55117

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575203**

Amount of Each Disbursement this Period

65.94

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

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

866.61

**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 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)  
**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. US Postmaster**

Mailing Address Riverview Station

City State Zip Code  
Saint Paul MN 55107

Purpose of Disbursement  
Direct Mail - Postage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 07 / 2015

**Transaction ID : D574887**

Amount of Each Disbursement this Period

4200.00

Full Name (Last, First, Middle Initial)

**B. US Postmaster**

Mailing Address Riverview Station

City State Zip Code  
Saint Paul MN 55107

Purpose of Disbursement  
Fundraising Postage

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2015

**Transaction ID : D574888**

Amount of Each Disbursement this Period

490.00

Full Name (Last, First, Middle Initial)

**C. US Postmaster**

Mailing Address Riverview Station

City State Zip Code  
Saint Paul MN 55107

Purpose of Disbursement  
Postage for Mailer of Minnesota State Refund Forms

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2015

**Transaction ID : D574889**

Amount of Each Disbursement this Period

588.00

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

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

5278.00

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

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

FOR LINE NUMBER:  
(check only one)

<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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. US Postmaster**

Mailing Address Riverview Station

City Saint Paul State MN Zip Code 55107

Purpose of Disbursement  
Business Reply Permit

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 26 / 2015

**Transaction ID : D575366**

Amount of Each Disbursement this Period

685.00

**B. WI SCTF**

Mailing Address Box 74400

City Milwaukee State WI Zip Code 53274

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 29 / 2015

**Transaction ID : D575340**

Amount of Each Disbursement this Period

36.00

**C. WI SCTF**

Mailing Address Box 74400

City Milwaukee State WI Zip Code 53274

Purpose of Disbursement  
Wage Levy

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

**Transaction ID : D575260**

Amount of Each Disbursement this Period

36.00

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

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

757.00



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

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

FOR LINE NUMBER:  
(check only one)

<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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. WI SCTF**

Mailing Address Box 74400

City Milwaukee State WI Zip Code 53274

Purpose of Disbursement Wage Levy

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575219**

Amount of Each Disbursement this Period

36.00

Full Name (Last, First, Middle Initial)

**B. Zachary Marko**

Mailing Address 6714 Orchard Ln N

City Minneapolis State MN Zip Code 55429

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

**Transaction ID : D575250**

Amount of Each Disbursement this Period

176.39

Full Name (Last, First, Middle Initial)

**C. Zachary Marko**

Mailing Address 6714 Orchard Ln N

City Minneapolis State MN Zip Code 55429

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2015

**Transaction ID : D575181**

Amount of Each Disbursement this Period

272.99

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

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

485.38

**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Zachary Marko**

Mailing Address 6714 Orchard Ln N

City Minneapolis State MN Zip Code 55429

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : D575330**

Amount of Each Disbursement this Period

1	7	8	.	0	4
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Cardmember Service-Drake Bank**

Mailing Address Po Box 6335

City Fargo State ND Zip Code 58125

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : D574891**

Amount of Each Disbursement this Period

1	9	4	.	8	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30344

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : D574893**

Amount of Each Disbursement this Period

1	1	6	.	4	0
---	---	---	---	---	---

**[MEMO ITEM]**

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

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

2	1	2	6	.	6	4
---	---	---	---	---	---	---

--	--	--	--	--	--

**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Sun Country Airlines**

Mailing Address 1300 Mendota Heights Rd

City State Zip Code  
Saint Paul MN 55120

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 18 / 2015

**Transaction ID : D574892**

Amount of Each Disbursement this Period

784.40

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

0.00

90377.26

**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 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Drake Bank State**

Mailing Address 60 Plato Blvd E

City State Zip Code  
Saint Paul MN 55107-1820

Purpose of Disbursement  
Contribution was misdeposited on 5/14/2015. Transferred out the same day,  
Neighbors for Lisa Bender  
Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 18 / 2015

**Transaction ID : D574894**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement  
Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement  
Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

250.00

250.00

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

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

FOR LINE NUMBER:  
(check only one)

<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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Drake Bank Federal**

Mailing Address 60 Plato Blvd E

City Saint Paul State MN Zip Code 55107-1820

Purpose of Disbursement  
Loan Principal

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 01 / 2015

**Transaction ID : D574910**

Amount of Each Disbursement this Period

1310.84

Category/  
Type

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Category/  
Type

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Category/  
Type

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

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

1310.84

1310.84

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

**A. Luanne Koskinen**

Mailing Address 12320 Gladiola St NW

City Coon Rapids State MN Zip Code 55433-1749

Purpose of Disbursement  
Returned Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D574886**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Stephanie Luger**

Mailing Address 1710 Colfax Ave S

City Minneapolis State MN Zip Code 55403-3001

Purpose of Disbursement  
Returned Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D574895**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Ardis Wexler**

Mailing Address 7520 Cahill Rd

City Edina State MN Zip Code 55439-2742

Purpose of Disbursement  
Returned Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : D574896**

Amount of Each Disbursement this Period

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

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)

**Minnesota Democratic-Farmer-Labor Party**

Full Name (Last, First, Middle Initial)

### A. GAK Visual Communications

Mailing Address 7600 W 27th St  
Suite 210

City Minneapolis State MN Zip Code 55426

Purpose of Disbursement  
Bus Wrap for Bus in Community Celebrations

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D575346

Amount of Each Disbursement this Period

4	8	4	.	3	1
---	---	---	---	---	---

### B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--

### C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--

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

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

4	8	4	.	3	1
---	---	---	---	---	---

4	8	4	.	3	1
---	---	---	---	---	---



SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Minnesota Democratic-Farmer-Labor Party** Transaction ID : L916

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Drake Bank Federal	Election: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 60 Plato Blvd E	
City Saint Paul State MN ZIP Code 55107-1820	

Original Amount of Loan 175000.00	Cumulative Payment To Date 1310.84	Balance Outstanding at Close of This Period 173689.16
--------------------------------------	---------------------------------------	--

**TERMS**

Date Incurred: MM / DD / YYYY (03 / 19 / 2015)      Date Due: MM / DD / YYYY (12 / 01 / 2016)      Interest Rate: 6.00 % (apr)      Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	173689.16
<b>TOTALS</b> This Period (last page in this line only).....▶	173689.16

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 90 OF 137
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>AFSCME Minn PEOPLE Committee Council 5 PAC</b>	Nature of Debt (Purpose): Employee Leaseback, Wages, Taxes, Benefits
Mailing Address 300 Hardman Ave S	
City State Zip Code South Saint Paul MN 55075-2435	

Outstanding Balance Beginning This Period <input type="text" value="27964.41"/>	<b>Transaction ID : D548099</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="27964.41"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Eventis</b>	Nature of Debt (Purpose): Phone Service
Mailing Address 221 E Hickory St	
City State Zip Code Mankato MN 56001	

Outstanding Balance Beginning This Period <input type="text" value="3.92"/>	<b>Transaction ID : D566545</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3.92"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Ken Martin</b>	Nature of Debt (Purpose): Meeting, Travel, Lodging, Meals
Mailing Address 4104 Oakbrooke Curv	
City State Zip Code Eagan MN 55122-4217	

Outstanding Balance Beginning This Period <input type="text" value="1406.77"/>	<b>Transaction ID : D569992</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1406.77"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="27964.41"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 91 OF 137
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Minnesota Democratic-Farmer-Labor Party**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Seven Corners Printing</b>	Nature of Debt (Purpose): Direct Mail Printing
Mailing Address 1099 Snelling Ave N	
City State Zip Code Saint Paul MN 55108-2705	

Outstanding Balance Beginning This Period 14021.44	<b>Transaction ID : D574633</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 14021.44

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>TGTG Analytics</b>	Nature of Debt (Purpose): Surveying & Modeling
Mailing Address PO Box 4042	
City State Zip Code Chicago IL 60654	

Outstanding Balance Beginning This Period 5000.00	<b>Transaction ID : D570019</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	19021.44
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	46985.85
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	173689.16
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	220675.01

**SCHEDULE H2 (FEC Form 3X)**

**ALLOCATION RATIOS**

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

**RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only:** Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER Humphrey Mondale Dinner 2015 ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported <b>Transaction ID : R910</b>	FEDERAL % <input style="width: 100px; text-align: center;" type="text" value="25.00"/> %	NONFEDERAL % <input style="width: 100px; text-align: center;" type="text" value="75.00"/> %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <input style="width: 100px;" type="text"/> %	NONFEDERAL % <input style="width: 100px;" type="text"/> %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <input style="width: 100px;" type="text"/> %	NONFEDERAL % <input style="width: 100px;" type="text"/> %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <input style="width: 100px;" type="text"/> %	NONFEDERAL % <input style="width: 100px;" type="text"/> %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <input style="width: 100px;" type="text"/> %	NONFEDERAL % <input style="width: 100px;" type="text"/> %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <input style="width: 100px;" type="text"/> %	NONFEDERAL % <input style="width: 100px;" type="text"/> %

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

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 05 / 06 / 2015	5263.88

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	5263.88
<b>Transaction ID : T3457</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

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

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 05 / 06 / 2015	5486.69

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	5486.69
<b>Transaction ID : T3458</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

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

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 05 / 06 / 2015	16749.90

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	16749.90
<b>Transaction ID : T3459</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

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

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 05 / 13 / 2015	7544.78

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	7544.78
<b>Transaction ID : T3460</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	



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

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 05 / 19 / 2015	7555.11

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	7555.11
<b>Transaction ID : T3461</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

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

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 05 / 19 / 2015	46042.29

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	46042.29
<b>Transaction ID : T3462</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

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

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 05 / 26 / 2015	7301.41

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	7301.41
<b>Transaction ID : T3463</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC) .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

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

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 05 / 27 / 2015	3134.59

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	3134.59
<b>Transaction ID : T3464</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support</b> (List Activity or Event Identifier)	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC) .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

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

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 05 / 27 / 2015	7544.43

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	7544.43
<b>Transaction ID : T3465</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred).....	

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

NAME OF COMMITTEE (In Full)  
Minnesota Democratic-Farmer-Labor Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Non Federal Share of Admin	MM / DD / YYYY 05 / 27 / 2015	123.53

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	123.53
<b>Transaction ID : T3466</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	106746.61
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred).....	106746.61

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) <b>Air Conditioning Associates</b>		Transaction ID : <b>D575354</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 55 W Ivy Ave				Allocated Activity or Event Year-To-Date 509629.16	
City Saint Paul	State MN	Zip Code 55117		Date 05 / 26 / 2015	
Purpose of Disbursement: HVAC Repair		Category/ Type			
Activity or Event Identifier: <b>Administrative</b>					
FEDERAL SHARE		+	NONFEDERAL SHARE		=
420.56			1081.44		
					=
					TOTAL AMOUNT
					1502.00

B. Full Name (Last, First, Middle Initial) <b>Aspen Waste Systems</b>		Transaction ID : <b>D575353</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2951 Weeks Ave SE				Allocated Activity or Event Year-To-Date 509629.16	
City Minneapolis	State MN	Zip Code 55414-2833		Date 05 / 26 / 2015	
Purpose of Disbursement: Trash & Recycling		Category/ Type			
Activity or Event Identifier: Administrative					
FEDERAL SHARE		+	NONFEDERAL SHARE		=
107.42			276.24		
					=
					TOTAL AMOUNT
					383.66

C. Full Name (Last, First, Middle Initial) <b>AXA Equitable</b>		Transaction ID : <b>D575226</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 13463				Allocated Activity or Event Year-To-Date 509629.16	
City Newark	State NJ	Zip Code 07188		Date 05 / 07 / 2015	
Purpose of Disbursement: Retirement Funds		Category/ Type			
Activity or Event Identifier: Administrative					
FEDERAL SHARE		+	NONFEDERAL SHARE		=
231.83			596.13		
					=
					TOTAL AMOUNT
					827.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
759.81		1953.81		2713.62

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)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: AXA Equitable. Transaction ID: D575227. Allocated Activity or Event: Administrative. Date: 05/07/2015. Total Amount: 2337.41.

Form B: Berrett Gall. Transaction ID: D575369. Allocated Activity or Event: Administrative. Date: 05/01/2015. Total Amount: 232.00.

Form C: Berrett Gall. Transaction ID: D575370. Allocated Activity or Event: Fundraising. Date: 05/01/2015. Total Amount: 101.18.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 744.73, 1925.86, 2670.59.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: H4

Transaction ID : D575369

3/12/2015, 4/12/2015 ATT PO Box 6416, Carol Stream, Il 60197, \$113.53, \$118.47, Cell Phone.

Form/Schedule: H4

Transaction ID: D575370

4/22/2015 Envelopes.Com, 5300 New Horizon Bl, Amityville, NY 11701, Envelopes, \$101.18.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Dependable Automotive Service. Transaction ID: D575375. Allocated Activity or Event: Administrative. Date: 05/20/2015. Total Amount: 1205.25.

Form B: Direct TV. Transaction ID: D575342. Allocated Activity or Event: Administrative. Date: 05/18/2015. Total Amount: 273.65.

Form C: Drake Bank Federal. Transaction ID: D575158. Allocated Activity or Event: Administrative. Date: 05/04/2015. Total Amount: 1066.72.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 712.77, 1832.85, 2545.62.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D575159, Allocated Activity or Event: Administrative, Date: 05/04/2015, FEDERAL SHARE: 341.24, NONFEDERAL SHARE: 877.49, TOTAL AMOUNT: 1218.73

Form B: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D575160, Allocated Activity or Event: Administrative, Date: 05/04/2015, FEDERAL SHARE: 44.53, NONFEDERAL SHARE: 114.52, TOTAL AMOUNT: 159.05

Form C: Full Name (Last, First, Middle Initial) Drake Bank Federal, Transaction ID : D574901, Allocated Activity or Event: Administrative, Date: 05/26/2015, FEDERAL SHARE: 5.60, NONFEDERAL SHARE: 14.40, TOTAL AMOUNT: 20.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE (391.37), NONFEDERAL SHARE (1006.41), TOTAL AMOUNT (1397.78)

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) <b>Drake Bank Federal</b>		Transaction ID : <b>D575153</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 60 Plato Blvd E			Allocated Activity or Event Year-To-Date 509629.16	
City Saint Paul	State MN	Zip Code 55107-1820	Date 05 / 31 / 2015	
Purpose of Disbursement: Bank Charges		Category/ Type	Date	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	
35.82			92.11	
		=	TOTAL AMOUNT	
			127.93	

B. Full Name (Last, First, Middle Initial) <b>Drake Bank Federal</b>		Transaction ID : <b>D575154</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 60 Plato Blvd E			Allocated Activity or Event Year-To-Date 509629.16	
City Saint Paul	State MN	Zip Code 55107-1820	Date 05 / 31 / 2015	
Purpose of Disbursement: Bank Charges		Category/ Type	Date	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	
7.04			18.09	
		=	TOTAL AMOUNT	
			25.13	

C. Full Name (Last, First, Middle Initial) <b>Drake Bank Federal</b>		Transaction ID : <b>D575155</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 60 Plato Blvd E			Allocated Activity or Event Year-To-Date 509629.16	
City Saint Paul	State MN	Zip Code 55107-1820	Date 05 / 31 / 2015	
Purpose of Disbursement: Bank Charges		Category/ Type	Date	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	
8.69			22.36	
		=	TOTAL AMOUNT	
			31.05	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.55		132.56		184.11

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Drake Bank Federal, Transaction ID: D575156. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Bank Charges), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (05/31/2015), and a summary table showing Federal Share (4.46), NonFederal Share (11.48), and Total Amount (15.94).

Form B: Drake Bank Federal, Transaction ID: D575157. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Bank Charges), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (05/31/2015), and a summary table showing Federal Share (1.67), NonFederal Share (4.29), and Total Amount (5.96).

Form C: Drake Bank State, Transaction ID: D575389. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (State Share of Refund Xcel Energy-79% State-No Location or Date), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (05/14/2015), and a summary table showing Federal Share (133.02), NonFederal Share (0.00), and Total Amount (133.02).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (139.15) + NONFEDERAL SHARE (15.77) = TOTAL AMOUNT (154.92)

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: EFTPS Fed Tax Payment, Transaction ID: D575224. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date totals.

Form B: EFTPS Fed Tax Payment, Transaction ID: D575264. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date totals.

Form C: Ellen Perrault, Transaction ID: D575212. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date totals.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 2902.60, NONFEDERAL SHARE 7463.84, TOTAL AMOUNT 10366.44

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

A. Full Name (Last, First, Middle Initial) <b>Ellen Perrault</b>		Transaction ID : <b>D575368</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 553 Ashland Ave			Allocated Activity or Event Year-To-Date 509629.16		
City Saint Paul	State MN	Zip Code 55102-2007	Date 05 / 01 / 2015		
Purpose of Disbursement: Cell Phones		Category/ Type	Date		
Activity or Event Identifier: <b>Administrative</b>					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.23			59.74		82.97

B. Full Name (Last, First, Middle Initial) <b>Ellen Perrault</b>		Transaction ID : <b>D575235</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 553 Ashland Ave			Allocated Activity or Event Year-To-Date 509629.16		
City Saint Paul	State MN	Zip Code 55102-2007	Date 05 / 15 / 2015		
Purpose of Disbursement: Payroll		Category/ Type	Date		
Activity or Event Identifier: Administrative					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
485.83			1249.28		1735.11

C. Full Name (Last, First, Middle Initial) <b>Ellen Perrault</b>		Transaction ID : <b>D575371</b>	Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 553 Ashland Ave			Allocated Activity or Event Year-To-Date 509629.16		
City Saint Paul	State MN	Zip Code 55102-2007	Date 05 / 18 / 2015		
Purpose of Disbursement: Mileage		Category/ Type	Date		
Activity or Event Identifier: Administrative					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
94.41			242.78		337.19

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
603.47		1551.80		2155.27

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: H4

Transaction ID : D575368

5/1/2015 ATT, PO Box 6416, Lisle, IL 60197, \$82.97, Cell Phone.

Form/Schedule:

Transaction ID:



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Ellen Perrault, Transaction ID: D575312. Allocated Activity or Event: Administrative. Date: 05/29/2015. Amounts: FEDERAL SHARE 485.84, NONFEDERAL SHARE 1249.29, TOTAL AMOUNT 1735.13.

Form B: Enviro Care Pest Solutions, Transaction ID: D575355. Allocated Activity or Event: Administrative. Date: 05/26/2015. Amounts: FEDERAL SHARE 71.84, NONFEDERAL SHARE 184.72, TOTAL AMOUNT 256.56.

Form C: Evans & Katz LLC, Transaction ID: D575343. Allocated Activity or Event: Administrative. Date: 05/18/2015. Amounts: FEDERAL SHARE 107.24, NONFEDERAL SHARE 275.76, TOTAL AMOUNT 383.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 664.92, 1709.77, 2374.69.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty).

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Transaction ID : D575376
Eventis
Mailing Address 221 E Hickory St
City Mankato State MN Zip Code 56001
Purpose of Disbursement: Phone Service
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 05/26/2015
FEDERAL SHARE 214.42 + NONFEDERAL SHARE 551.35 = TOTAL AMOUNT 765.77

Form B: Full Name (Last, First, Middle Initial) Transaction ID : D575377
Eventis
Mailing Address 221 E Hickory St
City Mankato State MN Zip Code 56001
Purpose of Disbursement: Phone Service
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 05/26/2015
FEDERAL SHARE 1.10 + NONFEDERAL SHARE 2.82 = TOTAL AMOUNT 3.92

Form C: Full Name (Last, First, Middle Initial) Transaction ID : D575344
F & F Janitorial Services, Inc
Mailing Address 318 Page St W
City Saint Paul State MN Zip Code 55107
Purpose of Disbursement: Office Cleaning
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 05/18/2015
FEDERAL SHARE 272.11 + NONFEDERAL SHARE 699.70 = TOTAL AMOUNT 971.81

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 487.63, 1253.87, 1741.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Farris Marudas, Transaction ID: D575345. Administrative activity. Date: 05/18/2015. Total amount: 35.52.

Form B: Farris Marudas, Transaction ID: D575381. Fundraising activity. Date: 05/26/2015. Total amount: 782.36.

Form C: First Insurance Funding, Transaction ID: D575356. Administrative activity. Date: 05/26/2015. Total amount: 2641.56.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 945.18, NONFEDERAL SHARE 2514.26, TOTAL AMOUNT 3459.44.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : D575362</b> <b>First Insurance Funding</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 450 Skokie Blvd, #1000		Allocated Activity or Event Year-To-Date 509629.16	
City Northbrook State IL Zip Code 60065	Date <input type="text" value="05"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>		
Purpose of Disbursement: ACH Charge	Category/Type <input type="text"/>		
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="4.20"/>		<input type="text" value="10.80"/>	<input type="text" value="15.00"/>

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : D575361</b> <b>GE Capital</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 31001		Allocated Activity or Event Year-To-Date 509629.16	
City Pasadena State CA Zip Code 91110-0001	Date <input type="text" value="05"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>		
Purpose of Disbursement: Copier Lease	Category/Type <input type="text"/>		
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="105.64"/>		<input type="text" value="271.65"/>	<input type="text" value="377.29"/>

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : D575161</b> <b>HealthPartners</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 8170 33rd Ave S		Allocated Activity or Event Year-To-Date 509629.16	
City Bloomington State MN Zip Code 55425-4516	Date <input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>		
Purpose of Disbursement: Health Insurance	Category/Type <input type="text"/>		
Activity or Event Identifier: Administrative			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
<input type="text" value="315.86"/>		<input type="text" value="812.21"/>	<input type="text" value="1128.07"/>

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="425.70"/>		<input type="text" value="1094.66"/>		<input type="text" value="1520.36"/>

**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
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: HealthPartners, Transaction ID: D575363. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Health Insurance), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (05/27/2015), and a summary table showing Federal Share (1131.17), NonFederal Share (2908.73), and Total Amount (4039.90).

Form B: Heidi Kraus Kaplan, Transaction ID: D575211. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (05/01/2015), and a summary table showing Federal Share (238.39), NonFederal Share (612.99), and Total Amount (851.38).

Form C: Heidi Kraus Kaplan, Transaction ID: D575233. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Payroll), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (05/15/2015), and a summary table showing Federal Share (238.39), NonFederal Share (613.01), and Total Amount (851.40).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (1607.95) + NONFEDERAL SHARE (4134.73) = TOTAL AMOUNT (5742.68)

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Heidi Kraus Kaplan, Transaction ID: D575310. Allocated Activity or Event: Administrative. Date: 05/29/2015. Total Amount: 851.38.

Form B: Hilton Hotel, Transaction ID: D575374. Allocated Activity or Event: Fundraising. Date: 05/18/2015. Total Amount: 61389.72.

Form C: Huebsch, Transaction ID: D575347. Allocated Activity or Event: Administrative. Date: 05/18/2015. Total Amount: 63.92.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 15603.72, 46701.30, 62305.02.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Huebsch, Transaction ID: D575360. Allocated Activity or Event: Administrative. Purpose of Disbursement: Rug Service. Date: 05/26/2015. Amounts: FEDERAL SHARE 8.95, NONFEDERAL SHARE 23.01, TOTAL AMOUNT 31.96.

Form B: Ken Martin, Transaction ID: D575378. Allocated Activity or Event: Administrative. Purpose of Disbursement: Mileage. Date: 05/18/2015. Amounts: FEDERAL SHARE 138.06, NONFEDERAL SHARE 355.02, TOTAL AMOUNT 493.08.

Form C: Ken Martin, Transaction ID: D575379. Allocated Activity or Event: Administrative. Purpose of Disbursement: Generic Party Lunches. Date: 05/18/2015. Amounts: FEDERAL SHARE 34.74, NONFEDERAL SHARE 89.33, TOTAL AMOUNT 124.07.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 181.75, 467.36, 649.11.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values are empty.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: H4

Transaction ID : D575379

5/5/2015 Neighborhood Caf?, 1570 Selby Ave, St Paul, MN 55104, \$20.93, Lunch Meeting. 5/5/2015 Mai Village, 394 University Ave W, St Paul, MN 55103, \$41.97, Lunch Meeting. 4/3/2015 Downtowner Woodfire Grill, 253 W 7th St, St Paul, MN 55102, \$25.72, Lunch Meeting. 4/7/2015 Murray's 26 S 6th St, Mpls, MN 55414, \$35.45, Lunch Meeting.

Form/Schedule:

Transaction ID:



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Ken Martin, Transaction ID: D575380. Allocated Activity or Event: Administrative. Date: 05/18/2015. Total Amount: 426.61.

Form B: Libby Keefe, Transaction ID: D575216. Allocated Activity or Event: Administrative. Date: 05/01/2015. Total Amount: 1893.09.

Form C: Libby Keefe, Transaction ID: D575257. Allocated Activity or Event: Administrative. Date: 05/15/2015. Total Amount: 1893.10.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1179.59, 3033.21, 4212.80.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: H4

Transaction ID : D575380

4/7/2015 Murray's 26 S 6th St, St Paul, MN 55414, \$8.31, Lunch Tip. 4/8/2015 Mai Village, 394 University Ave W, St Paul, MN 55103, Lunch Meeting, \$46.39. 4/11/2015 Mabel Murphy's Hwy 210, Fergus Falls, MN 56537, Lunch Meeting \$35.20. 4/14/2015 Brasa, 777 Grand Ave, St Paul, MN 55105, Lunch Meeting, \$32.76. 4/21/2015 Bombay Bistro, 820 Marquette Ave, Mpls, MN 55402, Lunch Meeting, \$303.95.

Form/Schedule:

Transaction ID:

**SCHEDULE H4 (FEC Form 3X)**

**DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

**Minnesota Democratic-Farmer-Labor Party**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Libby Keefe</b>		<b>Transaction ID : D575315</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 591 Lincoln Ave			Allocated Activity or Event Year-To-Date 509629.16	
City Saint Paul	State MN	Zip Code 55102-2814	Date 05 / 29 / 2015	
Purpose of Disbursement: Payroll		Category/ Type	Date	
Activity or Event Identifier: <b>Administrative</b>				
FEDERAL SHARE		+	NONFEDERAL SHARE	
530.07			1363.03	
		=	TOTAL AMOUNT	
			1893.10	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Linda McEwen</b>		<b>Transaction ID : D575213</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2157 Eleanor Ave			Allocated Activity or Event Year-To-Date 509629.16	
City Saint Paul	State MN	Zip Code 55116-1357	Date 05 / 01 / 2015	
Purpose of Disbursement: Payroll		Category/ Type	Date	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	
381.09			979.93	
		=	TOTAL AMOUNT	
			1361.02	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Linda McEwen</b>		<b>Transaction ID : D575234</b>	<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2157 Eleanor Ave			Allocated Activity or Event Year-To-Date 509629.16	
City Saint Paul	State MN	Zip Code 55116-1357	Date 05 / 15 / 2015	
Purpose of Disbursement: Payroll		Category/ Type	Date	
Activity or Event Identifier: Administrative				
FEDERAL SHARE		+	NONFEDERAL SHARE	
381.08			979.93	
		=	TOTAL AMOUNT	
			1361.01	

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1292.24		3322.89		4615.13

**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)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Linda McEwen, Transaction ID: D575372. Administrative activity, dated 05/18/2015. Total amount: 111.72.

Form B: Linda McEwen, Transaction ID: D575311. Administrative activity, dated 05/29/2015. Total amount: 1361.03.

Form C: Lockridge Grindal Nauen PLLP, Transaction ID: D575365. Administrative activity, dated 05/27/2015. Total amount: 385.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 520.17, NONFEDERAL SHARE 1337.58, TOTAL AMOUNT 1857.75.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

: 97 `A -G7 9 @ @ B9 CI G`H9 LH`F9 @ H98 `HC `5 `F9 DCFH`G7 <98 I @ `CF `H9 A -N5 H-CB

Form/Schedule: H4

Transaction ID : D575372

4/1/2015 ULINE, PO Box 88741, Chicago, IL 60680, Mail Tubes, \$101.85. 5/5/2015 USPS, 292 Eva St, St Paul, MN 55107, Postage \$9.87.

Form/Schedule:

Transaction ID:

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Marge Hoffa, Transaction ID: D575210. Allocated Activity: Administrative. Date: 05/01/2015. Amounts: FEDERAL SHARE 162.40, NONFEDERAL SHARE 417.61, TOTAL AMOUNT 580.01.

Form B: Marge Hoffa, Transaction ID: D575232. Allocated Activity: Administrative. Date: 05/15/2015. Amounts: FEDERAL SHARE 162.40, NONFEDERAL SHARE 417.60, TOTAL AMOUNT 580.00.

Form C: Marge Hoffa, Transaction ID: D575309. Allocated Activity: Administrative. Date: 05/29/2015. Amounts: FEDERAL SHARE 162.40, NONFEDERAL SHARE 417.61, TOTAL AMOUNT 580.01.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 487.20, 1252.82, 1740.02.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values are empty.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Transaction ID : D575221
Minnesota Department of Revenue
Mailing Address PO Box 821
City Minneapolis State MN Zip Code 55440-0821
Purpose of Disbursement: State Withholding Tax
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 05/04/2015
FEDERAL SHARE 202.72 + NONFEDERAL SHARE 521.28 = TOTAL AMOUNT 724.00

Form B: Full Name (Last, First, Middle Initial) Transaction ID : D575261
Minnesota Department of Revenue
Mailing Address PO Box 821
City Minneapolis State MN Zip Code 55440-0821
Purpose of Disbursement: State Withholding Tax
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 05/15/2015
FEDERAL SHARE 202.72 + NONFEDERAL SHARE 521.28 = TOTAL AMOUNT 724.00

Form C: Full Name (Last, First, Middle Initial) Transaction ID : D575263
Minnesota Department of Revenue
Mailing Address PO Box 821
City Minneapolis State MN Zip Code 55440-0821
Purpose of Disbursement: Wage Levy
Activity or Event Identifier: Administrative
Allocated Activity or Event: Administrative
Date 05/27/2015
FEDERAL SHARE 24.47 + NONFEDERAL SHARE 62.91 = TOTAL AMOUNT 87.38

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 429.91, 1105.47, 1535.38

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Mitel Leasing. Transaction ID: D575359. Allocated Activity or Event: Administrative. Date: 05/26/2015. Total Amount: 595.89.

Form B: NGP VAN Inc. Transaction ID: D575348. Allocated Activity or Event: Administrative. Date: 05/18/2015. Total Amount: 750.00.

Form C: North Central States Regional Council of Carpenter. Transaction ID: D575349. Allocated Activity or Event: Administrative. Date: 05/18/2015. Total Amount: 675.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 565.85, 1455.04, 2020.89.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Principal Life, Transaction ID: D575162. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Dental & Life Insurance), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (05/27/2015), and a summary table showing Federal Share (37.98), NonFederal Share (97.65), and Total Amount (135.63).

Form B: Principal Life, Transaction ID: D575364. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Dental & Health Insurance), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (05/27/2015), and a summary table showing Federal Share (90.79), NonFederal Share (233.47), and Total Amount (324.26).

Form C: Ramsey County, Transaction ID: D575341. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Property Taxes), Activity or Event Identifier (Administrative), Allocated Activity or Event (Administrative checked), Date (05/05/2015), and a summary table showing Federal Share (5965.96), NonFederal Share (15341.04), and Total Amount (21307.00).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (6094.73) + NONFEDERAL SHARE (15672.16) = TOTAL AMOUNT (21766.89)

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Ready Landscape. Transaction ID: D575350. Allocated Activity or Event: Administrative. Date: 05/18/2015. Total Amount: 1337.62.

Form B: Safeguard Business Systems. Transaction ID: D574897. Allocated Activity or Event: Administrative. Date: 05/20/2015. Total Amount: 235.31.

Form C: Sarah Black. Transaction ID: D575215. Allocated Activity or Event: Administrative. Date: 05/01/2015. Total Amount: 1614.19.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 892.39, 2294.73, 3187.12.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Sarah Black, Transaction ID: D575256. Allocated Activity or Event: Administrative. Date: 05/15/2015. Total Amount: 1614.18.

Form B: Sarah Black, Transaction ID: D575314. Allocated Activity or Event: Administrative. Date: 05/29/2015. Total Amount: 1614.19.

Form C: Solutions Builders - OK, Transaction ID: D575351. Allocated Activity or Event: Administrative. Date: 05/18/2015. Total Amount: 1538.26.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1334.65, 3431.98, 4766.63.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) SPRWS, Transaction ID : D575358, Allocated Activity or Event: Administrative, Date: 05/26/2015, Amounts: FEDERAL SHARE 22.18, NONFEDERAL SHARE 57.02, TOTAL AMOUNT 79.20

Form B: Full Name (Last, First, Middle Initial) Stagetime Productions, Transaction ID : D575373, Allocated Activity or Event: Fundraising, Date: 05/05/2015, Amounts: FEDERAL SHARE 250.00, NONFEDERAL SHARE 750.00, TOTAL AMOUNT 1000.00

Form C: Full Name (Last, First, Middle Initial) Verizon Wireless, Transaction ID : D575357, Allocated Activity or Event: Administrative, Date: 05/26/2015, Amounts: FEDERAL SHARE 86.24, NONFEDERAL SHARE 221.76, TOTAL AMOUNT 308.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 358.42, 1028.78, 1387.20

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values are empty.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Vicki Wright, Transaction ID: D575214. Allocated Activity or Event: Administrative. Date: 05/01/2015. Total Amount: 1668.03.

Form B: Vicki Wright, Transaction ID: D575236. Allocated Activity or Event: Administrative. Date: 05/15/2015. Total Amount: 1668.02.

Form C: Vicki Wright, Transaction ID: D575367. Allocated Activity or Event: Administrative. Date: 05/26/2015. Total Amount: 51.36.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 948.48, 2438.93, 3387.41.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: H4

Transaction ID : D575367

5/1/2015 Office Max, 1271 Promenade Pl, Eagan, MN 55121, Binder Dividers, \$6.42. Mileage \$44.94.

Form/Schedule:

Transaction ID:

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Vicki Wright, Transaction ID: D575313. Allocated Activity or Event: Administrative. Date: 05/29/2015. Amounts: FEDERAL SHARE 467.05, NONFEDERAL SHARE 1200.98, TOTAL AMOUNT 1668.03.

Form B: Xcel Energy, Transaction ID: D575352. Allocated Activity or Event: Administrative. Date: 05/18/2015. Amounts: FEDERAL SHARE 230.65, NONFEDERAL SHARE 593.11, TOTAL AMOUNT 823.76.

Form C: Cardmember Service-Drake Bank, Transaction ID: D575383. Allocated Activity or Event: Administrative. Date: 05/18/2015. Amounts: FEDERAL SHARE 373.60, NONFEDERAL SHARE 960.68, TOTAL AMOUNT 1334.28.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1071.30, 2754.77, 3826.07.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

Form A: Full Name (Last, First, Middle Initial) Transaction ID : D575385
Autonet Mobile
Mailing Address 1700 Montgomery St, Suite 111
City San Francisco State CA Zip Code 94111
Purpose of Disbursement: Internet Service
Activity or Event Identifier: Administrative
[MEMO ITEM]
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 509629.16
Date 03 / 31 / 2015
FEDERAL SHARE 16.52 + NONFEDERAL SHARE 42.48 = TOTAL AMOUNT 59.00

Form B: Full Name (Last, First, Middle Initial) Transaction ID : D575386
Intuit
Mailing Address PO Box 2981
City Phoenix State AZ Zip Code 85062-2981
Purpose of Disbursement: Quickbooks Payroll Service
Activity or Event Identifier: Administrative
[MEMO ITEM]
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 509629.16
Date 04 / 06 / 2015
FEDERAL SHARE 135.31 + NONFEDERAL SHARE 347.93 = TOTAL AMOUNT 483.24

Form C: Full Name (Last, First, Middle Initial) Transaction ID : D575387
MSFT On Line
Mailing Address One Microsoft Way
City Redmond State WA Zip Code 98052
Purpose of Disbursement: Online Backup Server
Activity or Event Identifier: Administrative
[MEMO ITEM]
Allocated Activity or Event: Administrative
Allocated Activity or Event Year-To-Date 509629.16
Date 04 / 16 / 2015
FEDERAL SHARE 174.72 + NONFEDERAL SHARE 449.28 = TOTAL AMOUNT 624.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 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))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]



SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Minnesota Democratic-Farmer-Labor Party

**A.** Full Name (Last, First, Middle Initial) **Transaction ID : D575384**  
**Panera Bread**  
Mailing Address 1409 Cope Ave E

City State Zip Code  
Saint Paul MN 55109-2602

Purpose of Disbursement:  
Staff Food

Activity or Event Identifier:  
**Administrative**  
**[MEMO ITEM]**

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
509629.16

Date 03 / 24 / 2015

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.05		120.99		168.04

**B.** Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code

Purpose of Disbursement:  
Activity or Event Identifier:

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
Date

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

**C.** Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code

Purpose of Disbursement:  
Activity or Event Identifier:

Allocated Activity or Event:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
Date

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

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
41397.23	112887.21	154284.44