

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

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

ADDRESS (number and street)  Check if different than previously reported.  
**806 2nd Ave N PO Box 1538**

CITY, STATE and ZIP CODE STATE/DISTRICT  
**Fargo, ND 58107 ND 01**

2. FEC IDENTIFICATION NUMBER **C00349464**

3. IS THIS REPORT AN AMENDMENT?  
 YES  NO

**4. TYPE OF REPORT**

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

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

**SUMMARY**

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>1/1/2000</u> through <u>3/31/2000</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	\$58,830.00	\$58,830.00
(b) Total Contribution Refunds (from Line 20(d))	\$0.00	\$0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	\$58,830.00	\$58,830.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$18,467.95	\$18,467.95
(b) Total Offsets to Operating Expenditures (from Line 14)	\$0.00	\$0.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	\$18,467.95	\$18,467.95
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$149,068.54	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	

For further information contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-718-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer **John T. Korsmo**

Signature of Treasurer  Date **4/15/2000**

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

# DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (In full) Dorso for Congress		Report Covering the Period:	
	C00348464	From: 1/1/2000	To: 3/31/2000
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>			
(b) Individuals/Persons Other Than Political Committees			
(i) Itemized (Use Schedule A)		\$25,100.00	11(b)(i)
(ii) Unitemized		\$19,230.00	11(b)(ii)
(iii) Total of Contributions from Individuals		\$44,330.00	11(b)(iii)
(b) Political Party Committees		\$0.00	11(b)
(c) Other Political Committees (such as PACs)		\$12,500.00	11(c)
(d) The Candidate		\$0.00	11(d)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(b)(i), (ii), (b), and (d))		\$56,830.00	11(e)
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>		\$0.00	12
<b>13. LOANS:</b>			
(a) Made or Guaranteed by the Candidate		\$0.00	13(a)
(b) All Other Loans		\$0.00	13(b)
(c) TOTAL LOANS (add 13(a) and (b))		\$0.00	13(c)
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Returns, etc.)</b>		\$0.00	14
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b>		\$1,069.34	15
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14, and 15)</b>		\$57,899.34	16
<b>II. DISBURSEMENTS</b>			
<b>17. OPERATING EXPENDITURES</b>		\$18,467.95	17
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		\$0.00	18
<b>19. LOAN REPAYMENTS:</b>			
(a) Of Loans Made or Guaranteed by the Candidate		\$0.00	19(a)
(b) Of All Other Loans		\$0.00	19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		\$0.00	19(c)
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>			
(a) Individuals/Persons Other Than Political Committees		\$0.00	20(a)
(b) Political Party Committees		\$0.00	20(b)
(c) Other Political Committees (such as PACs)		\$0.00	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b), and (c))		\$0.00	20(d)
<b>21. OTHER DISBURSEMENTS</b>		\$0.00	21
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d), and 21)</b>		\$18,467.95	22
<b>III. CASH SUMMARY</b>			
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>		\$109,637.15	23
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>		\$57,899.34	24
<b>25. SUBTOTAL (add Line 23 and Line 24)</b>		\$167,536.49	25
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</b>		\$18,467.95	26
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)</b>		\$149,068.54	27

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 7

FOR LINE NUMBER

11(a)(9)

**Contributions from Individuals**

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NAME OF COMMITTEE (In Full)

**Dorso for Congress**

**C00349464**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
<b>Kasper, Richard</b> 83 28th Ave N Fargo ND 58102		1/3/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Retired		
	Aggregate Year-to-Date > \$1,000.00		
<b>B. Full Name, Mailing Address and ZIP Code</b> <b>Campbell, Steve J.</b> 905 Orchard Park Dr. Fargo ND 58104	<b>Global Electric Motorcar</b>	1/3/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Executive		
	Aggregate Year-to-Date > \$1,000.00		
<b>C. Full Name, Mailing Address and ZIP Code</b> <b>Hofer, Michael J.</b> 1611 Round Hill Dr. Fargo ND 58104	<b>Diagnostic Med Sys Inc</b>	1/3/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation President		
	Aggregate Year-to-Date > \$2,000.00		
<b>D. Full Name, Mailing Address and ZIP Code</b> <b>Hofar, Michael J.</b> 1611 Round Hill Dr. Fargo ND 58104	<b>Diagnostic Med Sys Inc</b>	1/3/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation President		
	Aggregate Year-to-Date > \$2,000.00		
<b>E. Full Name, Mailing Address and ZIP Code</b> <b>Montler, Kenneth R.</b> 26440 137th Ave SE Kent WA 98042	<b>Global Electric Motorcar</b>	1/3/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Executive		
	Aggregate Year-to-Date > \$1,000.00		
<b>F. Full Name, Mailing Address and ZIP Code</b> <b>Paulson, Daniel J.</b> RR 2 Box 26A Moorhead MN 56560	<b>Diagnostic Med Sys Inc</b>	1/3/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Executive		
	Aggregate Year-to-Date > \$2,000.00		
<b>G. Full Name, Mailing Address and ZIP Code</b> <b>Paulson, Daniel J.</b> RR 2 Box 26A Moorhead MN 56560	<b>Diagnostic Med Sys Inc</b>	1/3/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Executive		
	Aggregate Year-to-Date > \$2,000.00		

REPRODUCTION of Receipts This Page (optional)

\$7,000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 7  
FOR LINE NUMBER 11(a)(1)

**Contributions from Individuals**

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NAME OF COMMITTEE (in Full) **Dorso for Congress** **C00349464**

<p><b>A. Full Name, Mailing Address and ZIP Code</b> Sjostrom, Charles J. 806 24th Ave S. Fargo ND 58103</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Investment Center</p> <p>Occupation Account Executive</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year) 1/6/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> Daggett, Delta R.R. 3 Box 670 Frazee MN 56544</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Daggett Trucking</p> <p>Occupation Owner</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year) 1/20/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> Johnson, Richard M. PO Box 1562 Bismarck ND 58502</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Johnson Trailer Sales</p> <p>Occupation President</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year) 1/20/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> Warford, John H. 800 Prospect PT Bismarck ND 58501</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Self</p> <p>Occupation dentist</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year) 1/20/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> Howell, L. Michael 173 South Woodcrest Dr. Fargo ND 58102</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Hericare Med. Group</p> <p>Occupation Surgeon</p> <p>Aggregate Year-to-Date &gt; \$250.00</p>	<p>Date (month, day, year) 1/22/2000</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> Dixon, James E., Jr. PO Box 10307 Fargo ND 58106</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Dixon Insurance</p> <p>Occupation Insurance Broker</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year) 1/24/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> Dixon, Melissa PO Box 10307 Fargo ND 58106</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Dixon Insurance</p> <p>Occupation Insurance Agent</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year) 1/24/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>

SUBTOTAL of Receipts This Page (optional)	\$3,250.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 3 OF 7  
FOR LINE NUMBER 11(a)(i)

**Contributions from Individuals**

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NAME OF COMMITTEE (in Full)			
<b>Dorsa for Congress</b>		<b>C00349464</b>	
<b>A. Full Name, Mailing Address and ZIP Code</b> Halliday, D. Ross 10801 Happy Valley Rd Scottsdale AZ 85255	<b>Name of Employer</b> Self	<b>Date (month, day, year)</b> 1/24/2000	<b>Amount of Each Receipt this Period</b> \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Occupation</b> Doctor <b>Aggregate Year-to-Date</b> > \$250.00		
<b>B. Full Name, Mailing Address and ZIP Code</b> Simonson, E. A. 903 Orchard Park Dr Fargo ND 58104	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 1/24/2000	<b>Amount of Each Receipt this Period</b> \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Occupation</b> Retired <b>Aggregate Year-to-Date</b> > \$250.00		
<b>C. Full Name, Mailing Address and ZIP Code</b> Scott, John W. Box 186 Gilby ND 58235	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 1/24/2000	<b>Amount of Each Receipt this Period</b> \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Occupation</b> Farmer <b>Aggregate Year-to-Date</b> > \$250.00		
<b>D. Full Name, Mailing Address and ZIP Code</b> Olson, Dennis J. 2860 Longfellow Rd Fargo ND 58102	<b>Name of Employer</b> Coughlin Olson Agency	<b>Date (month, day, year)</b> 1/24/2000	<b>Amount of Each Receipt this Period</b> \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Occupation</b> President <b>Aggregate Year-to-Date</b> > \$1,000.00		
<b>E. Full Name, Mailing Address and ZIP Code</b> Oldham Inmann, Pamela 729 Evening Star Way Castle Rock CO 80104	<b>Name of Employer</b> Phillip Morris Co	<b>Date (month, day, year)</b> 1/24/2000	<b>Amount of Each Receipt this Period</b> \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Occupation</b> Dir Government Relation <b>Aggregate Year-to-Date</b> > \$500.00		
<b>F. Full Name, Mailing Address and ZIP Code</b> Nelson, Dale S. PO Box 883 Willmar MN 56201	<b>Name of Employer</b> Nelson International	<b>Date (month, day, year)</b> 1/24/2000	<b>Amount of Each Receipt this Period</b> \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Occupation</b> President <b>Aggregate Year-to-Date</b> > \$500.00		
<b>G. Full Name, Mailing Address and ZIP Code</b> Hector, Fred M. 8816 S University Dr Fargo ND 58104	<b>Name of Employer</b> Self	<b>Date (month, day, year)</b> 1/26/2000	<b>Amount of Each Receipt this Period</b> \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Occupation</b> Farmer <b>Aggregate Year-to-Date</b> > \$500.00		

<b>SUBTOTAL of Receipts This Page (optional)</b>	>	\$3,250.00
<b>TOTAL This Period (last page this line number only)</b>	>	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Decedent's Ordinary Page

PAGE 4 OF 7

FOR LINE NUMBER 11(a)(1)

**Contributions from Individuals**

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NAME OF COMMITTEE (in Full)			
<b>Dorsa for Congress</b>		<b>C00349464</b>	
<b>A. Full Name, Mailing Address and ZIP Code</b> McCulley, James W. 616 Southwood Dr Fargo ND 58103	<b>Name of Employer</b> Self	<b>Date (month, day, year)</b> 2/4/2000	<b>Amount of Each Receipt this Period</b> \$500.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Occupation</b> Orthodontist	<b>Aggregate Year-to-Date</b> > \$500.00	
<b>B. Full Name, Mailing Address and ZIP Code</b> Jambois, John C. 1736 8th St S Fargo ND 58103	<b>Name of Employer</b> Fecton Products	<b>Date (month, day, year)</b> 2/8/2000	<b>Amount of Each Receipt this Period</b> \$500.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Occupation</b> President	<b>Aggregate Year-to-Date</b> > \$500.00	
<b>C. Full Name, Mailing Address and ZIP Code</b> Geston, Scott H. 6466 13th St N Fargo ND 58103	<b>Name of Employer</b> Cable One of Fargo	<b>Date (month, day, year)</b> 2/10/2000	<b>Amount of Each Receipt this Period</b> \$500.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Occupation</b> General Manager	<b>Aggregate Year-to-Date</b> > \$500.00	
<b>D. Full Name, Mailing Address and ZIP Code</b> Howard, James J. 414 Nicollet Mall Minneapolis MN 55401	<b>Name of Employer</b> Northern States Power	<b>Date (month, day, year)</b> 2/28/2000	<b>Amount of Each Receipt this Period</b> \$500.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Occupation</b> Executive	<b>Aggregate Year-to-Date</b> > \$500.00	
<b>E. Full Name, Mailing Address and ZIP Code</b> Frate, Daniel 601 2nd Ave So Minneapolis MN 55402	<b>Name of Employer</b> U.S. Bancorp	<b>Date (month, day, year)</b> 2/28/2000	<b>Amount of Each Receipt this Period</b> \$400.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Occupation</b> Vice-Chairman	<b>Aggregate Year-to-Date</b> > \$400.00	
<b>F. Full Name, Mailing Address and ZIP Code</b> Barry, John 2104 Hastings Ave Newport MN 55055	<b>Name of Employer</b> Self	<b>Date (month, day, year)</b> 2/28/2000	<b>Amount of Each Receipt this Period</b> \$500.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Occupation</b> investor	<b>Aggregate Year-to-Date</b> > \$500.00	
<b>G. Full Name, Mailing Address and ZIP Code</b> Heasley, Philip G. 18085 Breezy Point Rd Wayzata MN 55391	<b>Name of Employer</b> US Bank	<b>Date (month, day, year)</b> 3/1/2000	<b>Amount of Each Receipt this Period</b> \$1,000.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>Occupation</b> Vpres	<b>Aggregate Year-to-Date</b> > \$1,000.00	

<b>\$-TOTAL of Receipts This Page (optional)</b>	<b>\$3,700.00</b>
<b>TOTAL This Period (last page this line number only)</b>	

**SCHEDULE A ITEMIZED RECEIPTS**

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

PAGE 5 OF 7  
FOR LINE NUMBER 11(a)(1)

**Contributions from Individuals**

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NAME OF COMMITTEE (in Full) **Dorsa for Congress** **C00349454**

<p><b>A. Full Name, Mailing Address and ZIP Code</b>  <b>Campbell, James R.</b>  <b>5521 Woodcrest DR</b>  <b>Minneapolis MN 55424</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Wells Fargo</p> <p>Occupation Pres</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year) 3/1/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b>  <b>Pillsbury, George S.</b>  <b>1300 Bracketts Pt Rd</b>  <b>Wayzata MN 55391</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year) 3/1/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b>  <b>Olson, Allen I.</b>  <b>7386 Howard Ln</b>  <b>Eden Prairie MN 55346</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Winn Ind Bankers Assoc</p> <p>Occupation Director</p> <p>Aggregate Year-to-Date &gt; \$250.00</p>	<p>Date (month, day, year) 3/1/2000</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b>  <b>Mitau, Lee R.</b>  <b>601 2nd Ave S</b>  <b>Minneapolis MN 55402</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer US Bank</p> <p>Occupation EVP</p> <p>Aggregate Year-to-Date &gt; \$250.00</p>	<p>Date (month, day, year) 3/1/2000</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b>  <b>Rohr, Daniel C.</b>  <b>110 Groveland Terrace</b>  <b>Minneapolis MN 55403</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date &gt; \$300.00</p>	<p>Date (month, day, year) 3/1/2000</p>	<p>Amount of Each Receipt this Period \$300.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b>  <b>Wigley, Michael R.</b>  <b>PO Box 376</b>  <b>Long Lake MN 55356</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Great Plains Cos Inc</p> <p>Occupation CEO</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year) 3/1/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b>  <b>Knuth, Edwin S.</b>  <b>500 W. Reno Ave</b>  <b>Bismarck ND 58504</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Oaktree Realtors</p> <p>Occupation Realtor</p> <p>Aggregate Year-to-Date &gt; \$300.00</p>	<p>Date (month, day, year) 3/1/2000</p>	<p>Amount of Each Receipt this Period \$300.00</p>

<p><b>SUBTOTAL</b> of Receipts This Page (optional) &gt;</p>	<p>\$2,600.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) &gt;</p>	<p></p>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Debated Supervisory Page

PAGE 8 OF 7

FOR LINE NUMBER

11(a)(9)

**Contributions from Individuals**

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

**NAME OF COMMITTEE (In Full)**  
**Dorso for Congress** **C00349464**

<p><b>A. Full Name, Mailing Address and ZIP Code</b>                      Hubbard, Stanley E.                      1496 Riviera Ave S                      Lakeland MN 55043</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                      Hubbard Media Group</p> <p>Occupation                      President &amp; CEO</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year)                      3/1/2000</p>	<p>Amount of Each Receipt this Period                      \$500.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b>                      Schwalbach, Gerald A.                      2826 Dunwoody Ave                      Wayzata MN 55391</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                      US Bank</p> <p>Occupation                      Executive</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year)                      3/1/2000</p>	<p>Amount of Each Receipt this Period                      \$500.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b>                      Marvin, John W.                      PO Box 100                      Waterloo IA 50703</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                      Marvin Windows</p> <p>Occupation                      President</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year)                      3/8/2000</p>	<p>Amount of Each Receipt this Period                      \$500.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b>                      Liechty, Clarice                      Box 467                      Jamestown ND 58402</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation                      Farmer</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year)                      3/11/2000</p>	<p>Amount of Each Receipt this Period                      \$500.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b>                      Slater, Dorothy                      604 9th Ave SE                      Minot ND 58701</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation                      Retired</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year)                      3/24/2000</p>	<p>Amount of Each Receipt this Period                      \$500.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b>                      Porter, Todd                      704 8th Ave NE                      Mandan ND 58554</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                      Metro Area Ambulance</p> <p>Occupation                      Paramedic</p> <p>Aggregate Year-to-Date &gt; \$300.00</p>	<p>Date (month, day, year)                      3/27/2000</p>	<p>Amount of Each Receipt this Period                      \$300.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b>                      Fisher, F.F.                      13 28th Ave NE                      Fargo ND 58102</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer                      FF Fisher</p> <p>Occupation                      President</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year)                      3/27/2000</p>	<p>Amount of Each Receipt this Period                      \$500.00</p>

<p><b>SUBTOTAL of Receipts This Page (optional)</b></p>	<p>\$3,500.00</p>
<p><b>TOTAL This Period (last page this line number only)</b></p>	<p></p>



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 7 OF 7  
FOR LINE NUMBER 11(a)(i)

**Contributions from Individuals**

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

NAME OF COMMITTEE (In Full) **Dorso for Congress** **C00349464**

<p><b>A. Full Name, Mailing Address and ZIP Code</b>  <b>Dahl, Lila E.</b>  <b>7934 E Pueblo Ave 64</b>  <b>Mesa AZ 85208</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date &gt; \$250.00</p>	<p>Date (month, day, year) 3/30/2000</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b>  <b>Manig, Herbert F.</b>  <b>2638 27th St SW</b>  <b>Fargo ND 58103</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$250.00</p>	<p>Date (month, day, year) 3/31/2000</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b>  <b>Peterson, Curt</b>  <b>PO Box 1624</b>  <b>Bismarck ND 58502</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer ND AGC</p> <p>Occupation Executive Director</p> <p>Aggregate Year-to-Date &gt; \$250.00</p>	<p>Date (month, day, year) 3/31/2000</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b>  <b>Garwin, Virginia T.</b>  <b>8773 Forrest Ct</b>  <b>Littleton CO 80126</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Self</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date &gt; \$1,000.00</p>	<p>Date (month, day, year) 3/31/2000</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b>  <b>Butler, David J.</b>  <b>2633 W. Country Club Dr.</b>  <b>Fargo ND 58103</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation retired</p> <p>Aggregate Year-to-Date &gt; \$250.00</p>	<p>Date (month, day, year) 3/31/2000</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p><b>Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt;</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p><b>Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt;</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

<p><b>SUBTOTAL of Receipts This Page (optional)</b></p>	<p>&gt; \$2,000.00</p>
<p><b>TOTAL This Period (last page, this line number only)</b></p>	<p>&gt; \$25,100.00</p>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 11(p)

**Contributions from Other Political Committees**

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

NAME OF COMMITTEE (In Full) **Dorso for Congress** **C00349464**

<p><b>A. Full Name, Mailing Address and ZIP Code</b>  <b>PAC, AscGenContract</b>  <b>1957 E Street NW</b>  <b>Washington DC 20006</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date &gt; \$2,500.00</p>	<p>Date (month, day, year) 1/10/2000</p>	<p>Amount of Each Receipt this Period \$2,500.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b>  <b>PAC, NSP EPIC</b>  <b>414 Nicollet Mall</b>  <b>Minneapolis MN 55401</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date &gt; \$500.00</p>	<p>Date (month, day, year) 2/16/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b>  <b>PAC, USBankcorp PPP</b>  <b>601 Second Ave S</b>  <b>Minneapolis MN 55402</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date &gt; \$1,000.00</p>	<p>Date (month, day, year) 3/1/2000</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b>  <b>PAC, Dorsey National</b>  <b>220 S 6th St</b>  <b>Minneapolis MN 55402</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date &gt; \$1,000.00</p>	<p>Date (month, day, year) 3/3/2000</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b>  <b>PAC, ARM</b>  <b>11 55 21st St NW Suite 300</b>  <b>Washington DC 20038</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date &gt; \$4,000.00</p>	<p>Date (month, day, year) 3/7/2000</p>	<p>Amount of Each Receipt this Period \$4,000.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b>  <b>Pac, Phillips</b>  <b>7811 Montrose Rd</b>  <b>Potomac MD 20854</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date &gt; \$1,000.00</p>	<p>Date (month, day, year) 3/8/2000</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b>  <b>PAC, Majority Leader</b>  <b>4451 Brookfield Corp Dr Ste 200</b>  <b>Chantilly VA 20151</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date &gt; \$2,500.00</p>	<p>Date (month, day, year) 3/28/2000</p>	<p>Amount of Each Receipt this Period \$2,500.00</p>

<p><b>SUBTOTAL of Receipts This Page (optional)</b></p>	<p>\$12,500.00</p>
<p><b>TOTAL This Period (last page this line number only)</b></p>	<p>\$12,500.00</p>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedules for each category of the Detailed Summary Page

**Other Receipts**

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) **Dorao for Congress** C00348464

<p><b>A. Full Name, Mailing Address and ZIP Code</b> Dain Rauscher PO Box 1710 Fargo ND 58107</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$1,069.34</p>	<p>Date (month, day, year) 3/31/2000</p>	<p>Amount of Each Receipt this Period \$1,069.34 Money Market Interest INTEREST/DIV</p>
<p><b>Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt;</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p><b>Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt;</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p><b>Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt;</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p><b>Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt;</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p><b>Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt;</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p><b>Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt;</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

<p><b>SUBTOTAL of Receipts This Page (optional)</b></p>	<p>\$1,069.34</p>
<p><b>TOTAL This Period (last page this line number only)</b></p>	<p>\$1,069.34</p>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 4  
FOR LINE NUMBER 17

**Operating Expenditures**

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

**NAME OF COMMITTEE (In Full)**  
**Dorso for Congress** **C00349464**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Other (Enter Description) Campaign	Date (month, day, year)	Amount of Each Disbursement this Period
Artco PO Box 9015 Fargo ND 58105	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/5/2000	\$78.90
B. Full Name, Mailing Address and ZIP Code ATandT PO Box 2971 Omaha NE 68103	Purpose of Disbursement Office Expenses long Distance Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/5/2000	\$59.57
C. Full Name, Mailing Address and ZIP Code ATandT PO Box 2971 Omaha NE 68103	Purpose of Disbursement Office Expenses Long Distance Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	1/25/2000	\$47.77
D. Full Name, Mailing Address and ZIP Code ATandT PO Box 2971 Omaha NE 68103	Purpose of Disbursement Office Expenses Dec Long Distance Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	1/16/2000	\$33.13
E. Full Name, Mailing Address and ZIP Code Carlson, Gordon 2910 17th St S Ste 108 Moorhead MN 56560	Purpose of Disbursement Professional Services Financial Consultant Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/11/2000	\$260.00
F. Full Name, Mailing Address and ZIP Code Dorso, John 1121 28th Ave S Fargo ND 58103	Purpose of Disbursement Office Expenses Nov Dec Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	1/23/2000	\$986.42
G. Full Name, Mailing Address and ZIP Code Dorso, John 1121 28th Ave S Fargo ND 58103	Purpose of Disbursement Office Expenses Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/5/2000	\$163.42
H. Full Name, Mailing Address and ZIP Code Indigo Signworks 1622 Mave Ave Ste E Fargo ND 58103	Purpose of Disbursement Other (Enter Description) Signage Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	1/25/2000	\$250.80
I. Full Name, Mailing Address and ZIP Code Larson, Donald 263 Circle Dr N Fargo ND 58102	Purpose of Disbursement Campaign Consultant March Contract Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/13/2000	\$550.00

SUBTOTAL of Disbursements This Page (optional)	\$2,430.01
TOTAL This Period (last page this line number only)	

**SCHEULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule for each category of the Detailed Summary Page

PAGE 2 OF 4  
FOR LINE NUMBER 17

**Operating Expenditures**

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NAME OF COMMITTEE (in full) **Dorso for Congress** C00349464

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Larson, Donald 253 Circle Dr N Fargo ND 58102	Campaign Consultant Dec and Jan contract Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	1/11/2000	\$1,100.00
Larson, Donald 253 Circle Dr N Fargo ND 58102	Campaign Consultant Feb Contract Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	2/15/2000	\$550.00
Larson, Michelle 501 7th St S Ste 802 Fargo ND 58103	Campaign Consultant Dec, Jan, Feb Contract Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	2/15/2000	\$3,000.00
Michaels 4340 13th Ave SW Fargo ND 58103	Office Expenses Convention supplies Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	3/28/2000	\$36.63
Multi Mailing Services 705 E Main Ave Ste 3 West Fargo ND 58078	Campaign Mailings Postage Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	3/29/2000	\$1,729.87
Neutron Design 1365 Arkright St Ste 105 Saint Paul MN 55101	Other (Enter Description) Web Site Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	3/13/2000	\$2,000.00
Paper Warehouse 4340 13th Ave SW Fargo ND 58103	Office Expenses Convention supplies Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	3/28/2000	\$67.71
Pre Sort Plus PO Box 1655 Bismarck ND 58502	Campaign Mailings Dec statewide mailing Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	1/16/2000	\$1,966.15
Republican National Committee 310 First St SE Washington DC 20003	Office Expenses CMC Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	3/13/2000	\$200.00

SUBTOTAL of Disbursements This Page (optional)	\$10,650.36
TOTAL This Period (last page this line number only)	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule for each category of the Detailed Statement Page

PAGE 3 OF 4  
FOR LINE NUMBER 17

**Operating Expenditures**

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NAME OF COMMITTEE (in full) **Dorso for Congress** C00349464

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Rural Cellular Corp Box 2000 Alexandria MN 56308	Office Expenses Cellular Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	3/5/2000	\$81.52
Rural Cellular Corp Box 2000 Alexandria MN 56308	Office Expenses Don Cellular expense Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	1/16/2000	\$181.05
Rural Cellular Corp Box 2000 Alexandria MN 56308	Office Expenses Cellular Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	1/23/2000	\$80.86
Sams Club 4831 13th Ave SW Fargo ND 58103	Office Expenses Convention supplies Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	3/28/2000	\$23.28
Universal Services PO Box 3151 Fargo ND 58108	Office Expenses Supplies Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	3/13/2000	\$41.89
University Press 342 42 Street SW Fargo ND 58103	Office Expenses Printing Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	1/16/2000	\$1,548.41
University Press 342 42 Street SW Fargo ND 58103	Office Expenses Printing Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	1/23/2000	\$312.93
US Bancorp Card Services PO Box 6343 Fargo ND 58125	Office Expense Airline Tickets and Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	3/5/2000	\$1,635.94
US Bancorp Card Services PO Box 6343 Fargo ND 58125	Office Expenses Supplies Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	1/23/2000	\$295.01

SUBTOTAL of Disbursements This Page (optional)	\$4,200.89
TOTAL This Period (list page this line number only)	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 4 OF 4

FOR LINE NUMBER

17

**Operating Expenditures**

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NAME OF COMMITTEE (in Full) **Dorso for Congress** C00349464

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
<b>US West</b> <b>PO Box 1301</b> <b>Minneapolis MN 55483</b>	Office Expenses Feb Telephone Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/13/2000	\$62.50
<b>US West</b> <b>PO Box 1301</b> <b>Minneapolis MN 55483</b>	Office Expenses Feb Telephone Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/5/2000	\$61.52
<b>US West</b> <b>PO Box 1301</b> <b>Minneapolis MN 55483</b>	Office Expenses Dec Telephone Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	1/16/2000	\$62.67
<b>Winfrey And Company</b> <b>605 Upland Place</b> <b>Alexandria VA 22301</b>	Campaign Consultant March Contract Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/13/2000	\$1,000.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)	\$1,186.69
TOTAL This Period (last page this line number only)	\$18,467.95

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

Hand Delivered Date of Receipt

First Class Mail POSTMARKED  
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No Postmark

Postmark Illegible

Received from the House office of Records and Registration Date of Receipt

Received from the Senate Office of Public Records Date of Receipt

Other ( Specify): Postmarked  
and/or Date of Receipt

Electronic Filing

*ML*  
PREPARER

4-20-00  
DATE PREPARED