

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

Ellison for Congress

ADDRESS (number and street)

PO Box 6072

Check if different than previously reported. (ACC)

Minneapolis

MN

55406

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00422410

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MN

05

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

10

01

2009

through

12

31

2009

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

Carla Kjellberg

Signature of Treasurer

Electronically Filed by Carla Kjellberg

Date

01

31

2010

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Ellison for Congress

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 1 | 0 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To: 

|   |   |
|---|---|
| M | M |
| 1 | 2 |

|   |   |
|---|---|
| D | D |
| 3 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| <b>6. Net Contributions (other than loans)</b>  |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)).....  | 130769.74               | 510137.24                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)).....  | 0.00                    | 100.00                             |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                              | 130769.74               | 510037.24                          |
| <b>7. Net Operating Expenditures</b>  |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17).....   | 123485.92               | 549630.41                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 0.00                    | 7541.52                            |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....  | 123485.92               | 542088.89                          |
| <b>8. Cash on Hand at Close of<br/>Reporting Period (from Line 27).....</b>                                       | <b>141718.78</b>        |                                    |
| <b>9. Debts and Obligations Owed TO<br/>the Committee (Itemize all on<br/>Schedule C and/or Schedule D).....</b>  | <b>0.00</b>             |                                    |
| <b>10. Debts and Obligations Owed BY<br/>the Committee (Itemize all on<br/>Schedule C and/or Schedule D).....</b> | <b>0.00</b>             |                                    |

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
Ellison for Congress

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 1 | 0 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To: 

|   |   |
|---|---|
| M | M |
| 1 | 2 |

|   |   |
|---|---|
| D | D |
| 3 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| <b>I. RECEIPTS</b>   | <b>COLUMN A</b><br>Total This Period | <b>COLUMN B</b><br>Election Cycle-to-Date |
|--|--------------------------------------|---|
| <b>11. CONTRIBUTIONS (other than loans) FROM:</b>  |                                      |   |
| (a) Individuals/Persons Other Than Political Committees  | 74170.00                             | 281785.00                                 |
| (i) Itemized (use Schedule A).....   | 31105.51                             | 90341.42                                  |
| (ii) Unitemized.....   | 105275.51                            | 372126.42                                 |
| (iii) TOTAL of contributions from individuals..... ▶   | 0.00                                 | 0.00                                      |
| (b) Political Party Committees.....  | 25494.23                             | 138010.82                                 |
| (c) Other Political Committees (such as PACS).....   | 0.00                                 | 0.00                                      |
| (d) The Candidate.....   | 130769.74                            | 510137.24                                 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))                       |                                      |   |
| <b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>   | 0.00                                 | 0.00                                      |
| <b>13. LOANS</b>   |                                      |   |
| (a) Made or Guaranteed by the Candidate.....   | 0.00                                 | 0.00                                      |
| (b) All Other Loans.....   | 0.00                                 | 0.00                                      |
| (c) TOTAL LOANS (add Lines 13(a) and (b)).....   | 0.00                                 | 0.00                                      |
| <b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>                                 | 0.00                                 | 7541.52                                   |
| <b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>   | 0.00                                 | 0.00                                      |
| <b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b> | 130769.74                            | 517678.76                                 |

**DETAILED SUMMARY PAGE**  
of Disbursements

| <b>II. DISBURSEMENTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Election Cycle-to-Date</b> |
|--|---------------------------------------|--|
| 17. OPERATING EXPENDITURES.....  | 123485.92                             | 549630.41                                  |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES.....                         | 0.00                                  | 0.00                                       |
| 19. LOAN REPAYMENTS:   |                                       |  |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                                  | 0.00                                       |
| (b) Of all Other Loans.....  | 0.00                                  | 0.00                                       |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                                  | 0.00                                       |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                                       |  |
| (a) Individuals/Persons Other<br>Than Political Committees.....              | 0.00                                  | 100.00                                     |
| (b) Political Party Committees.....  | 0.00                                  | 0.00                                       |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                                  | 0.00                                       |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                                  | 100.00                                     |
| 21. OTHER DISBURSEMENTS.....   | 1500.00                               | 26210.00                                   |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ▶ | 124985.92                             | 575940.41                                  |

**III. CASH SUMMARY**

|   |           |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 135934.96 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....                             | 130769.74 |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 266704.70 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 124985.92 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 141718.78 |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 108  
(check only one)

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

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)  
Ellison for Congress

**A.**

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Jameel Aalim-Johnson   |                                    | Date of Receipt<br>MM / DD / YYYY<br>11 / 12 / 2009 |
| Mailing Address 8501 Chervil Road   |                                    | <b>Transaction ID:</b> C4655016                     |
| City Lanham   | State MD                           | Zip Code 20706                                      |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                                    | Amount of Each Receipt this Period<br>500.00        |
| Name of Employer<br>NASDAQ OMX  | Occupation<br>Government Relations |   |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>500.00 |   |

**B.**

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Ahmed Abdelwahed   |                                    | Date of Receipt<br>MM / DD / YYYY<br>12 / 15 / 2009 |
| Mailing Address 5623 W 107th St<br>Unit 3A  |                                    | <b>Transaction ID:</b> C4669564                     |
| City Chicago Ridge  | State IL                           | Zip Code 60415                                      |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                                    | Amount of Each Receipt this Period<br>250.00        |
| Name of Employer<br>Islamic Relief  | Occupation<br>Operations Manager   |   |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>250.00 |   |

**C.**

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Ahmad Agha   |                                     | Date of Receipt<br>MM / DD / YYYY<br>12 / 14 / 2009 |
| Mailing Address 1603 Woodland Ln  |                                     | <b>Transaction ID:</b> C4669218                     |
| City Bolingbrook  | State IL                            | Zip Code 60490                                      |
| FEC ID number of contributing federal political committee.<br><b>C</b>  |                                     | Amount of Each Receipt this Period<br>1000.00       |
| Name of Employer<br>Self-employed   | Occupation<br>Physician             |   |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>1000.00 |   |

|  |         |
|--|---------|
| <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 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 / 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Ellison for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Faiz Ahmed

Mailing Address 4540 Fender Road

City State Zip Code  
Lisle IL 60532

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

Name of Employer Tymetrix, Inc. Occupation Vice President

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 0 9

**Transaction ID:** C4619581

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Faiz Ahmed

Mailing Address 4540 Fender Road

City State Zip Code  
Lisle IL 60532

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

Name of Employer Tymetrix, Inc. Occupation Vice President

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 7 / 2 0 0 9

**Transaction ID:** C4661153

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
Faiz Ahmed

Mailing Address 4540 Fender Road

City State Zip Code  
Lisle IL 60532

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

Name of Employer Tymetrix, Inc. Occupation Vice President

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 7 / 2 0 0 9

**Transaction ID:** C4670401

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **75.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 108  
(check only one)

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

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)  
Ellison for Congress

|   |  |
|---|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Fiaz Ahmed</p> <p>Mailing Address 40 Olympic Drive</p> <p>City State Zip Code<br/>South Barrington IL 60010</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Northwest Suburban Anesthesi-<br/>eslgy Occupation Physician</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">500.00</p> | <p>Date of Receipt<br/>MM / DD / YYYY<br/>12 / 18 / 2009</p> <p><b>Transaction ID:</b> C4670903</p> <p>Amount of Each Receipt this Period<br/>500.00</p> |
|---|--|

|   |   |
|---|---|
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Rais Ahmed</p> <p>Mailing Address 13790 S 180th Ave</p> <p>City State Zip Code<br/>Goodyear AZ 85338</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer PepsiCo Occupation Management</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">110.00</p> | <p>Date of Receipt<br/>MM / DD / YYYY<br/>10 / 02 / 2009</p> <p><b>Transaction ID:</b> C4614009</p> <p>Amount of Each Receipt this Period<br/>-100.00</p> |
|---|---|

|   |  |
|---|--|
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Rais Ahmed</p> <p>Mailing Address 13790 S 180th Ave</p> <p>City State Zip Code<br/>Goodyear AZ 85338</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer PepsiCo Occupation Management</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">110.00</p> | <p>Date of Receipt<br/>MM / DD / YYYY<br/>11 / 19 / 2009</p> <p><b>Transaction ID:</b> C4660463</p> <p>Amount of Each Receipt this Period<br/>110.00</p> |
|---|--|

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | 510.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |        |

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

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

FOR LINE NUMBER: PAGE 8 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

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

Mailing Address 18 Kingsbury Ct

City State Zip Code  
Oak Brook IL 60523

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

Name of Employer Self-Employed  
Occupation Physician

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 4 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** C4668438

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mohammad Al-Khudari

Mailing Address 4700 W 95th St

City State Zip Code  
Oak Lawn IL 60453

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

Name of Employer Family Eye Physicians  
Occupation Physician

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 4 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** C4669210

Amount of Each Receipt this Period  
500.00

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

Mailing Address 719 Westminster Rd

City State Zip Code  
Brooklyn NY 11230

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

Name of Employer Hilton Hotels  
Occupation Information Requested

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
550.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 2 | 1 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** C4671464

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1800.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 108  
(check only one)

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

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)  
Ellison for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Mahmoud N Alshafei

Mailing Address 7 Cotting Ct

City State Zip Code  
Irmo SC 29063

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

Name of Employer D&A USED CARS INC Occupation PRESIDENT

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 550.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 9

**Transaction ID:** C4618319

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Mohamad Riad Alzein

Mailing Address 12634 W Anand Brook Dr

City State Zip Code  
Orland Park IL 60467-1129

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

Name of Employer Sinai Medical Center Occupation Physician

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 9

**Transaction ID:** C4668278

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Abdul R.C. Amine

Mailing Address 6518 Fox Ln

City State Zip Code  
Palos Heights IL 60463-2277

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 650.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 9

**Transaction ID:** C4668026

Amount of Each Receipt this Period  
500.00

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

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

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

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

FOR LINE NUMBER: PAGE 10 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

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

Mailing Address 4501 Strawberry Lane

City State Zip Code  
Golden Valley MN 55416-3370

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 3 | 0 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** C4630769

Amount of Each Receipt this Period  
500.00

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

Mailing Address 727 Sundown Dr

City State Zip Code  
Norman OK 73069

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 6 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** C4669887

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2815 Iowa St.

City State Zip Code  
Davenport IA 52803

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

Name of Employer CogentHealthCare Occupation Physician

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1850.52

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 1 | 7 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** C4656663

Amount of Each Receipt this Period  
1840.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2840.00**

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

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

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

FOR LINE NUMBER: PAGE 11 / 108

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Ellison for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Jawad Arshad

Mailing Address 6786 Rossmore Court

City State Zip Code  
West Bloomfield MI 48322

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

Name of Employer Occupation  
Henry Ford Health System Physician

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: C4671052

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Jamal M Barzinji

Mailing Address 11919 Safa Ct

City State Zip Code  
Herndon VA 20170

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

Name of Employer Occupation  
SAAR Foundation Owner

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt

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

Transaction ID: C4665344

Amount of Each Receipt this Period  
250.00

**C.**

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

Mailing Address 2305 Riverpointe Cir

City State Zip Code  
Minneapolis MN 55411-4279

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

Name of Employer Occupation  
Self-Employed Developer

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

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

Transaction ID: C4630594

Amount of Each Receipt this Period  
300.00

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

800.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

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

Mailing Address 2608 Cromwell Ct.

City State Zip Code  
Minneapolis MN 55410

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

Name of Employer Occupation  
Merrill Lynch Financial Advisor

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 2 | 9 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** C4672791

Amount of Each Receipt this Period  
500.00

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

Mailing Address PO Box 482

City State Zip Code  
Aspen CO 81612

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

Name of Employer Occupation  
Self-Employed Writer

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 1 | 9 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** C4660465

Amount of Each Receipt this Period  
1000.00

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

Mailing Address PO Box 482

City State Zip Code  
Aspen CO 81612

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

Name of Employer Occupation  
Self-Employed Writer

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 1 | 9 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** C4660464

Amount of Each Receipt this Period  
1400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2900.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 108

(check only one)

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

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)  
Ellison for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Kjell Bergh

Mailing Address 5428 Lyndale Ave S

City State Zip Code  
Minneapolis MN 55419

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

Name of Employer  
Borton Volvo & Borton Overseas

Occupation  
Businessman

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 9

Transaction ID: C4651230

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Shayna Berkowitz

Mailing Address 4028 Elliot Ave S

City State Zip Code  
Minneapolis MN 55407

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

Name of Employer  
Self Employed

Occupation  
Business Owner

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: C4673931

Amount of Each Receipt this Period

2400.00

**C.**

Full Name (Last, First, Middle Initial)  
Cora M Biernat

Mailing Address 3839 Hart Blvd  
Apt #313

City State Zip Code  
Columbia Heights MN 55421

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

Name of Employer  
N/A

Occupation  
Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
390.00

Date of Receipt

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

Transaction ID: C4653679

Amount of Each Receipt this Period

20.00

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

3420.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

**A.** Full Name (Last, First, Middle Initial)  
Cora M Biernat

Mailing Address 3839 Hart Blvd  
Apt #313

City Columbia Heights State MN Zip Code 55421

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 390.00

Date of Receipt: 11 / 17 / 2009  
**Transaction ID: C4656667**  
 Amount of Each Receipt this Period: 50.00

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

Mailing Address 3839 Hart Blvd  
Apt #313

City Columbia Heights State MN Zip Code 55421

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 390.00

Date of Receipt: 12 / 16 / 2009  
**Transaction ID: C4669904**  
 Amount of Each Receipt this Period: 50.00

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

Mailing Address 3839 Hart Blvd  
Apt #313

City Columbia Heights State MN Zip Code 55421

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 390.00

Date of Receipt: 12 / 16 / 2009  
**Transaction ID: C4670156**  
 Amount of Each Receipt this Period: 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 108  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Ellison for Congress

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

Mailing Address 3333 Helen St

City State Zip Code  
Alexandria VA 22305-2627

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

Name of Employer  
Bromelkamp Government Relations  
Occupation  
President

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 9

**Transaction ID:** C4669089

Amount of Each Receipt this Period  
500.00

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

Mailing Address 3136 Fremont Ave S

City State Zip Code  
Minneapolis MN 55408

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

Name of Employer  
NA  
Occupation  
Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 0 9

**Transaction ID:** C4619580

Amount of Each Receipt this Period  
25.00

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

Mailing Address 3136 Fremont Ave S

City State Zip Code  
Minneapolis MN 55408

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

Name of Employer  
NA  
Occupation  
Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 7 / 2 0 0 9

**Transaction ID:** C4661155

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **550.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 108

(check only one)

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

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)  
Ellison for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Linda Burkett

Mailing Address 3136 Fremont Ave S

City State Zip Code  
Minneapolis MN 55408

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

Name of Employer Occupation  
NA Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 525.00

Date of Receipt

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

Transaction ID: C4670403

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)  
Rehan N Chaudhri

Mailing Address 82 Roundabend Rd

City State Zip Code  
Tarrytown NY 10591

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

Name of Employer Occupation  
Altrinsic Investments

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

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

Transaction ID: C4667637

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
mehboob K. chaudhry

Mailing Address 311 shalimar ct.

City State Zip Code  
monroeville PA 15146

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

Name of Employer Occupation  
Self-Employed physcian

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 3 / 2 0 0 9

Transaction ID: C4664098

Amount of Each Receipt this Period

200.00

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

725.00

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



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

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

FOR LINE NUMBER: PAGE 17 / 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Ellison for Congress

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

Mailing Address 10140 N Vintage Ct

City State Zip Code  
Mequon WI 53092

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 1 8 / 2 0 0 9

**Transaction ID:** C4656909

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
John Elihue Codwell, II

Mailing Address 5105 San Jacinto St

City State Zip Code  
Houston TX 77004

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

Name of Employer Self-Employed Occupation Physician/Surgeon

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 2 / 1 1 / 2 0 0 9

**Transaction ID:** C4667680

Amount of Each Receipt this Period  
25.00

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

Mailing Address 2910 Holly Ln N

City State Zip Code  
Plymouth MN 55447

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 9

**Transaction ID:** C4651117

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **775.00**

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

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

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

FOR LINE NUMBER: PAGE 18 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

**A.** Full Name (Last, First, Middle Initial)  
Richard Copeland  
Mailing Address 4610 Milvio Avenue

City State Zip Code  
Las Vegas NV 89141

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

Name of Employer Occupation  
Thor Construction Chairman

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 9

**Transaction ID:** C4595929

Amount of Each Receipt this Period  
100.00

Election Cycle-to-Date ▼ 1350.00

**B.** Full Name (Last, First, Middle Initial)  
Richard Copeland  
Mailing Address 4610 Milvio Avenue

City State Zip Code  
Las Vegas NV 89141

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

Name of Employer Occupation  
Thor Construction Chairman

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 9

**Transaction ID:** C4653372

Amount of Each Receipt this Period  
500.00

Election Cycle-to-Date ▼ 1350.00

**C.** Full Name (Last, First, Middle Initial)  
Martin J Costello  
Mailing Address 3701 S 48th Ave

City State Zip Code  
Minneapolis MN 55406

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

Name of Employer Occupation  
Huges and Costello Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 9 / 2 0 0 9

**Transaction ID:** C4666979

Amount of Each Receipt this Period  
500.00

Election Cycle-to-Date ▼ 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1100.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

**A.** Full Name (Last, First, Middle Initial)  
Sage Fuller Cowles

Mailing Address 155 5th Ave S  
Suite 1000

City Minneapolis State MN Zip Code 55401-2550

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 11 / 09 / 2009  
**Transaction ID: C4653677**  
 Amount of Each Receipt this Period 500.00

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

Mailing Address 3048 Lake Shore Drive  
#B

City Minneapolis State MN Zip Code 55416

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

Name of Employer Jeffrey Dean Law Office Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 10 / 01 / 2009  
**Transaction ID: C4595982**  
 Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Clyde K El-Amin

Mailing Address 4527 S Drexel Blvd  
Unit 2-West

City Chicago State IL Zip Code 60653

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

Name of Employer Olive-Harvey College Occupation President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 12 / 14 / 2009  
**Transaction ID: C4668242**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

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

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

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

FOR LINE NUMBER: PAGE 20 / 108

(check only one)

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

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)  
Ellison for Congress

|   |  |                                    |   |  |  |
|---|--|------------------------------------|---|--|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Alamin Elamin               |                                    | Date of Receipt<br>MM / DD / YYYY<br>11 / 17 / 2009 |  |  |
|   | Mailing Address 72 Camelot Ridge Dr.                                   |                                    | <b>Transaction ID:</b> C4656643                     |  |  |
|   | City<br>Brandon  | State<br>FL                        | Zip Code<br>33511                                   | Amount of Each Receipt this Period<br>250.00 |  |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> |                                    |   |  |  |
|   | Name of Employer<br>University of Florida                              | Occupation<br>Physician            |   |  |  |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Election Cycle-to-Date ▼<br>500.00 |   |  |  |

|   |  |                                    |   |  |  |
|---|--|------------------------------------|---|--|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Alamin Elamin               |                                    | Date of Receipt<br>MM / DD / YYYY<br>12 / 17 / 2009 |  |  |
|   | Mailing Address 72 Camelot Ridge Dr.                                   |                                    | <b>Transaction ID:</b> C4670400                     |  |  |
|   | City<br>Brandon  | State<br>FL                        | Zip Code<br>33511                                   | Amount of Each Receipt this Period<br>250.00 |  |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> |                                    |   |  |  |
|   | Name of Employer<br>University of Florida                              | Occupation<br>Physician            |   |  |  |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Election Cycle-to-Date ▼<br>500.00 |   |  |  |

|   |  |                                    |   |  |  |
|---|--|------------------------------------|---|--|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Hasan M Elkhatib            |                                    | Date of Receipt<br>MM / DD / YYYY<br>12 / 14 / 2009 |  |  |
|   | Mailing Address 119 Rue Jardin   |                                    | <b>Transaction ID:</b> C4668252                     |  |  |
|   | City<br>Barrington   | State<br>IL                        | Zip Code<br>60010                                   | Amount of Each Receipt this Period<br>300.00 |  |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> |                                    |   |  |  |
|   | Name of Employer<br>Dena Brands USA Ltd                                | Occupation<br>President            |   |  |  |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Election Cycle-to-Date ▼<br>300.00 |   |  |  |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>800.00</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

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

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

FOR LINE NUMBER: PAGE 21 / 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Ellison for Congress

**A.** Full Name (Last, First, Middle Initial)  
Pear M Enam

Mailing Address 11237 Eastwood Dr

City State Zip Code  
Hagerstown MD 21742

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

Name of Employer Information Requested Occupation  
Occupation  
Physician

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 4 / 2 0 0 9

**Transaction ID:** C4664395

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1647 Portland Ave

City State Zip Code  
Saint Paul MN 55104-6838

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

Name of Employer Self-Employed Occupation  
Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 9

**Transaction ID:** C4621878

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 566 Marshall Ave

City State Zip Code  
Saint Paul MN 55102-1723

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

Name of Employer William Mitchell College of Law Occupation  
Professor

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 7 / 2 0 0 9

**Transaction ID:** C4656661

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

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

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

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

FOR LINE NUMBER: PAGE 22 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

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

Mailing Address 147 Cecil St SE

City Minneapolis State MN Zip Code 55414-3610

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

Name of Employer University of Minnesota Occupation Professor

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 12 / 21 / 2009  
**Transaction ID: C4671196**  
 Amount of Each Receipt this Period 500.00

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

Mailing Address 1910 Knox Ave S

City Minneapolis State MN Zip Code 55403

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 12 / 07 / 2009  
**Transaction ID: C4665358**  
 Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Fond Du Lac Band of Lake Superior Chippewa

Mailing Address 1720 Big Lake Road

City Cloquet State MN Zip Code 55720

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

Name of Employer Occupation

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 12 / 02 / 2009  
**Transaction ID: C4663129**  
 Amount of Each Receipt this Period 2400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3400.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Ellison for Congress

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

Mailing Address 713 Elizabeth Lane

City State Zip Code  
Minneapolis MN 55411

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

Name of Employer Occupation  
Kraus-Anderson Constructi- Director of Community Relations  
on Company

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 2 | 4 | / | 2 | 0 | 9 |   |

Transaction ID: C4661771

Amount of Each Receipt this Period  
200.00

350.00

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

Mailing Address 127 Christenson Ct NE

City State Zip Code  
Fridley MN 55432-4958

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 0 | 7 | / | 2 | 0 | 9 |   |

Transaction ID: C4614638

Amount of Each Receipt this Period  
50.00

250.00

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

Mailing Address 127 Christenson Ct NE

City State Zip Code  
Fridley MN 55432-4958

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 1 | 7 | / | 2 | 0 | 9 |   |

Transaction ID: C4656613

Amount of Each Receipt this Period  
100.00

250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **350.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

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

Mailing Address 64 Franklin Street

City State Zip Code  
Brookline MA 02445

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 285.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 5 / 2 0 0 9

**Transaction ID:** C4652370

Amount of Each Receipt this Period  
50.00

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

Mailing Address 64 Franklin Street

City State Zip Code  
Brookline MA 02445

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 285.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

**Transaction ID:** C4671261

Amount of Each Receipt this Period  
100.00

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

Mailing Address 42275 Chatterton Ct.

City State Zip Code  
Northville MI 48168

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 9

**Transaction ID:** C4669142

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **400.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

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

Mailing Address 364 Belvedere Ct N

City Canton State MI Zip Code 48188

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

Name of Employer CIG Corp. Occupation Consultant

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 09 / 2009  
**Transaction ID: C4615419**  
 Amount of Each Receipt this Period: 100.00

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

Mailing Address 364 Belvedere Ct N

City Canton State MI Zip Code 48188

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

Name of Employer CIG Corp. Occupation Consultant

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 11 / 09 / 2009  
**Transaction ID: C4653672**  
 Amount of Each Receipt this Period: 100.00

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

Mailing Address 5710 Golfview Dr

City Dearborn Heights State MI Zip Code 48127

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

Name of Employer American Bakery Products, Inc. Occupation Owner

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt: 11 / 18 / 2009  
**Transaction ID: C4656912**  
 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 3 )  
ITEMIZED RECEIPTS**

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 26 / 108                |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                       | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 11d  | <input type="checkbox"/> 12  | <input type="checkbox"/> 13a |
| <input type="checkbox"/> 13b  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  |

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)  
Ellison for Congress

|   |   |                                    |   |  |  |
|---|---|------------------------------------|---|--|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Allen Hamood         |                                    | Date of Receipt<br>MM / DD / YYYY<br>12 / 11 / 2009 |  |  |
|   | Mailing Address 5710 Golfview Dr                                |                                    | <b>Transaction ID:</b> C4667658                     |  |  |
|   | City<br>Dearborn Heights  | State<br>MI                        | Zip Code<br>48127                                   | Amount of Each Receipt this Period<br>150.00 |  |
|   | FEC ID number of contributing federal political committee.<br>C |                                    |   |  |  |
|   | Name of Employer<br>American Bakery Products, Inc.              |                                    | Occupation<br>Owner                                 |  |  |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Election Cycle-to-Date ▼<br>300.00 |   |  |  |

|   |   |                                    |   |  |  |
|---|---|------------------------------------|---|--|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Rehana Haniff        |                                    | Date of Receipt<br>MM / DD / YYYY<br>11 / 23 / 2009 |  |  |
|   | Mailing Address 6220 Penfield Ln                                |                                    | <b>Transaction ID:</b> C4661207                     |  |  |
|   | City<br>Solon   | State<br>OH                        | Zip Code<br>44139                                   | Amount of Each Receipt this Period<br>100.00 |  |
|   | FEC ID number of contributing federal political committee.<br>C |                                    |   |  |  |
|   | Name of Employer<br>N/A   |                                    | Occupation<br>Homemaker                             |  |  |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Election Cycle-to-Date ▼<br>450.00 |   |  |  |

|   |   |                                    |   |  |  |
|---|---|------------------------------------|---|--|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Richard Harrison     |                                    | Date of Receipt<br>MM / DD / YYYY<br>10 / 13 / 2009 |  |  |
|   | Mailing Address 2600 Natchez Ave S                              |                                    | <b>Transaction ID:</b> C4616616                     |  |  |
|   | City<br>Minneapolis   | State<br>MN                        | Zip Code<br>55416                                   | Amount of Each Receipt this Period<br>250.00 |  |
|   | FEC ID number of contributing federal political committee.<br>C |                                    |   |  |  |
|   | Name of Employer<br>Information Requested                       |                                    | Occupation<br>Information Requested                 |  |  |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Election Cycle-to-Date ▼<br>250.00 |   |  |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | 500.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |        |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

**A.** Full Name (Last, First, Middle Initial)  
Diane Hofstede  
Mailing Address 610 Ramsey St NE  
City Minneapolis State MN Zip Code 55413-1825  
FEC ID number of contributing federal political committee. **C**  
Name of Employer City of Minneapolis Occupation City Council Member  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1350.00  
Date of Receipt 11 / 24 / 2009  
Transaction ID: C4661411  
Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Masud Imran  
Mailing Address 3719 Heron Ridge Dr  
City Rochester Hills State MI Zip Code 48309-4522  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Henry Ford Hospital Occupation Anesthesiologist  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 12 / 16 / 2009  
Transaction ID: C4669907  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Allen Isaacman  
Mailing Address 1106 Sheridan Ave N  
City Minneapolis State MN Zip Code 55411  
FEC ID number of contributing federal political committee. **C**  
Name of Employer University of Minnesota Occupation Professor  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 10 / 31 / 2009  
Transaction ID: C4651113  
Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 28 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

**A.** Full Name (Last, First, Middle Initial)  
Frank F Islam

Mailing Address 11808 Centurion Way

City State Zip Code  
Potomac MD 20854-6419

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

Name of Employer Occupation  
FI Investment Group CEO & Chairman

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 7 / 2 0 0 9

**Transaction ID:** C4670449

Amount of Each Receipt this Period  
1000.00

1500.00

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

Mailing Address 6688 Joliet Rd

City State Zip Code  
Indian Head Park IL 60525

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

Name of Employer Occupation  
Joliet Doctors Clinic Physician

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 9

**Transaction ID:** C4669217

Amount of Each Receipt this Period  
500.00

500.00

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

Mailing Address 1331 W Whitmore Ct

City State Zip Code  
Lake Forest IL 60045

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 8 / 2 0 0 9

**Transaction ID:** C4656910

Amount of Each Receipt this Period  
100.00

300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1600.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Hind Jarrah, PHD

Mailing Address 2707 Lakeside Dr

City State Zip Code  
McKinney TX 75070

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

Name of Employer Self-Employed Occupation  
Archilogist

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 01 / 2009

**Transaction ID:** C4662732

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
Elham J Jbara

Mailing Address 9109 S 54th Ave

City State Zip Code  
Oak Lawn IL 60453

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

Name of Employer Illinois Coalition for Im-migrant & Ref Occupation  
Program Director

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 14 / 2009

**Transaction ID:** C4668239

Amount of Each Receipt this Period  
250.00

**C.**

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

Mailing Address 2800 LaSalle Plaza  
800 LaSalle Ave

City State Zip Code  
Minneapolis MN 55402

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

Name of Employer Robins Kaplan Miller Cire-si Occupation  
Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 28 / 2009

**Transaction ID:** C4672258

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

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

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

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

FOR LINE NUMBER: PAGE 30 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

**A.** Full Name (Last, First, Middle Initial)  
Fazal M Khan

Mailing Address 11090 - 18 Mile Rd

City State Zip Code  
Sterling Hts MI 48313

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

Name of Employer Occupation  
General Dynamics Engineer

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 6 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** C4670082

Amount of Each Receipt this Period  
100.00

350.00

**B.** Full Name (Last, First, Middle Initial)  
Mohammed Jamil Ahmed Khan

Mailing Address 1660 W. Long Lake Rd.

City State Zip Code  
Bloomfield Hills MI 48302

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 2 | 3 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** C4661197

Amount of Each Receipt this Period  
100.00

250.00

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

Mailing Address 75 Teaneck Rd

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Occupation  
Self Employed Business Owner

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 6 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** C4669900

Amount of Each Receipt this Period  
500.00

500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **700.00**

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

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

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

FOR LINE NUMBER: PAGE 31 / 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Ellison for Congress

**A.** Full Name (Last, First, Middle Initial)  
Sultan Feroze Khan

Mailing Address 26 S Centre St

City Pottsville State PA Zip Code 17901-3001

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

Name of Employer Pottsville Hospital Occupation Physician

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 12 / 28 / 2009  
**Transaction ID: C4672491**  
Amount of Each Receipt this Period: 250.00

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

Mailing Address 231 Ambria Dr

City Mundelein State IL Zip Code 60060

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

Name of Employer Islamic Cultural Center Occupation Executive Director

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt: 12 / 28 / 2009  
**Transaction ID: C4672351**  
Amount of Each Receipt this Period: 250.00

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

Mailing Address 1800 Humboldt Ave S

City Minneapolis State MN Zip Code 55403-2813

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt: 11 / 01 / 2009  
**Transaction ID: C4651129**  
Amount of Each Receipt this Period: 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 800.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

**A.** Full Name (Last, First, Middle Initial)  
Abdelhalim Lawabni  
Mailing Address 16251 Royal Rd  
City Ramsey State MN Zip Code 55303  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Employed Occupation Information Requested  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General    Other (specify) ▼  
1000.00  
Date of Receipt 10 / 31 / 2009  
Transaction ID: C4651109  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Hope C Lawabni  
Mailing Address 16251 Royal Rd  
City Ramsey State MN Zip Code 55303  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General    Other (specify) ▼  
1000.00  
Date of Receipt 10 / 31 / 2009  
Transaction ID: C4651110  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Leech Lake Band Of Ojibwe  
Mailing Address 6530 US Hwy 2 NW  
City Cass Lake State MN Zip Code 56633  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General    Other (specify) ▼  
1000.00  
Date of Receipt 12 / 02 / 2009  
Transaction ID: C4663154  
Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00  
**TOTAL** This Period (last page this line number only) ..... ►



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

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

Mailing Address 1108 Foley Ave

City State Zip Code  
Champaign IL 61820

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

Name of Employer Occupation  
University of Illinois Computer Programmer

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

**Transaction ID:** C4674075

Amount of Each Receipt this Period  
125.00

287.00

**B.** Full Name (Last, First, Middle Initial)  
Steven R Lewis, Jr.

Mailing Address 300 Wall Street #705

City State Zip Code  
Saint Paul MN 55101

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

Name of Employer Occupation  
Self-Employed Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 9

**Transaction ID:** C4620577

Amount of Each Receipt this Period  
2000.00

2000.00

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

Mailing Address 16190 Royal Rd

City State Zip Code  
Ramsey MN 55303

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

Name of Employer Occupation  
Self Employed Business Owner

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 9

**Transaction ID:** C4651107

Amount of Each Receipt this Period  
1000.00

1250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3125.00**

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

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

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

FOR LINE NUMBER: PAGE 34 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

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

Mailing Address 16190 Royal Rd

City Ramsey State MN Zip Code 55303

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

Name of Employer Self Employed Occupation Business Owner

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt 11 / 24 / 2009  
**Transaction ID: C4661408**  
 Amount of Each Receipt this Period 250.00

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

Mailing Address 16190 Royal Rd

City Anoka State MN Zip Code 55303

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt 10 / 31 / 2009  
**Transaction ID: C4651108**  
 Amount of Each Receipt this Period 1000.00

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

Mailing Address 16190 Royal Rd

City Anoka State MN Zip Code 55303

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt 11 / 24 / 2009  
**Transaction ID: C4661407**  
 Amount of Each Receipt this Period 250.00

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

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

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

|   |   |               |
|---|---|---------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 35 / 108 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d<br><input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 |               |

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)  
Ellison for Congress

|   |   |   |
|---|---|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Martha F Lofstrom            | Date of Receipt<br>MM / DD / YYYY<br>12 / 16 / 2009 |
|   | Mailing Address 3841 Joppa Ave S  | <b>Transaction ID:</b> C4669941                     |
|   | City State Zip Code<br>St Louis Park MN 55416                           | Amount of Each Receipt this Period<br>1000.00       |
|   | FEC ID number of contributing federal political committee.<br>C         |   |
|   | Name of Employer Occupation<br>United Health Group Reporting Specialist |   |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>2000.00                                     |   |

|   |  |   |
|---|--|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Paul Lukas                  | Date of Receipt<br>MM / DD / YYYY<br>12 / 28 / 2009 |
|   | Mailing Address 4600 IDS Center<br>80 South Eighth Street              | <b>Transaction ID:</b> C4672543                     |
|   | City State Zip Code<br>Minneapolis MN 55402                            | Amount of Each Receipt this Period<br>250.00        |
|   | FEC ID number of contributing federal political committee.<br>C        |   |
|   | Name of Employer Occupation<br>Nichols, Kaster & Anderson, PL Attorney |   |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>250.00                                     |   |

|   |   |   |
|---|---|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>William Manning              | Date of Receipt<br>MM / DD / YYYY<br>10 / 14 / 2009 |
|   | Mailing Address 463 Mount Curve Blvd                                    | <b>Transaction ID:</b> C4617817                     |
|   | City State Zip Code<br>Saint Paul MN 55105                              | Amount of Each Receipt this Period<br>1000.00       |
|   | FEC ID number of contributing federal political committee.<br>C         |   |
|   | Name of Employer Occupation<br>Robins, Kaplan, Miller & Ciresi Attorney |   |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>1000.00                                     |   |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2250.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 108  
(check only one)

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

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)  
Ellison for Congress

**A.**

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Steven Mayer   |                                    | Date of Receipt<br>MM / DD / YYYY<br>11 / 17 / 2009 |
| Mailing Address 45 University Ave SE<br>#706  |                                    | <b>Transaction ID:</b> C4656657                     |
| City<br>Minneapolis   | State<br>MN                        | Zip Code<br>55414                                   |
| FEC ID number of contributing federal political committee.<br>C   |                                    | Amount of Each Receipt this Period<br>150.00        |
| Name of Employer<br>Effective Communities LLC   | Occupation<br>Consultant           |   |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>225.00 |   |

**B.**

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Leonid Merman  |                                    | Date of Receipt<br>MM / DD / YYYY<br>11 / 24 / 2009 |
| Mailing Address 646 Woodland Way  |                                    | <b>Transaction ID:</b> C4661426                     |
| City<br>Eagan   | State<br>MN                        | Zip Code<br>55123                                   |
| FEC ID number of contributing federal political committee.<br>C   |                                    | Amount of Each Receipt this Period<br>500.00        |
| Name of Employer<br>Mortenson Construction  | Occupation<br>IT                   |   |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>600.00 |   |

**C.**

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br>Yelena Merman  |                                     | Date of Receipt<br>MM / DD / YYYY<br>10 / 31 / 2009 |
| Mailing Address 646 Woodland Way  |                                     | <b>Transaction ID:</b> C4651128                     |
| City<br>Eagan   | State<br>MN                         | Zip Code<br>55123                                   |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Amount of Each Receipt this Period<br>2000.00       |
| Name of Employer<br>Information Requested   | Occupation<br>Information Requested |   |
| Receipt For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>2000.00 |   |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 2650.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

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

Mailing Address 6481 Napa Ave

City Rancho Cucamonga State CA Zip Code 91701

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

Name of Employer: Glen Avon Food Occupation: General Manager

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 12 / 28 / 2009  
**Transaction ID: C4672354**  
 Amount of Each Receipt this Period: 100.00

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

Mailing Address 6481 Napa Ave

City Rancho Cucamonga State CA Zip Code 91701

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

Name of Employer: Glen Avon Food Occupation: General Manager

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 12 / 28 / 2009  
**Transaction ID: C4672353**  
 Amount of Each Receipt this Period: 900.00

**C.** Full Name (Last, First, Middle Initial)  
Mille Lacs Band of Ojibwe

Mailing Address 43408 Oodena Dr

City Onamia State MN Zip Code 56359-2236

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

Name of Employer Occupation

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3400.00

Date of Receipt: 12 / 02 / 2009  
**Transaction ID: C4663138**  
 Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2000.00

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

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

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

FOR LINE NUMBER: PAGE 38 / 108

(check only one)

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

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)  
Ellison for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Mille Lacs Band of Ojibwe

Mailing Address 43408 Oodena Dr

City State Zip Code  
Onamia MN 56359-2236

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3400.00

Date of Receipt

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

Transaction ID: C4663135

Amount of Each Receipt this Period

1400.00

**B.**

Full Name (Last, First, Middle Initial)  
Atefeh Naeemi

Mailing Address 2247 Marissa Way

City State Zip Code  
Shelby Twp MI 48316

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 0 3 / 2 0 0 9

Transaction ID: C4664107

Amount of Each Receipt this Period

200.00

**C.**

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

Mailing Address 4721 Elliot Ave

City State Zip Code  
Minneapolis MN 55407-3516

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

Name of Employer Occupation  
Change Inc. Therapist

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

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

Transaction ID: C4669910

Amount of Each Receipt this Period

1000.00

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

2600.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

**A.** Full Name (Last, First, Middle Initial)  
Kim Nelson  
Mailing Address 14405 8th Ave N  
City Plymouth State MN Zip Code 55447  
FEC ID number of contributing federal political committee. **C**  
Name of Employer General Mills Occupation Marketing  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
300.00  
Date of Receipt 12 / 18 / 2009  
Transaction ID: C4670760  
Amount of Each Receipt this Period 300.00

**B.** Full Name (Last, First, Middle Initial)  
Donald Nichols  
Mailing Address 13 Scotch Pine Court  
City North Oaks State MN Zip Code 55127  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Nichols, Kaster & Anderson, PLLP Occupation Lawyer  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
250.00  
Date of Receipt 12 / 28 / 2009  
Transaction ID: C4672511  
Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Ravi E Norman  
Mailing Address 3404 Robinwood Terrace  
City Minnetonka State MN Zip Code 55305  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Thor Construction Occupation CEO  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1000.00  
Date of Receipt 11 / 24 / 2009  
Transaction ID: C4661392  
Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1050.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 40 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

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

Mailing Address 1510 11th Street  
Ste 201

City State Zip Code  
Santa Monica CA 90401

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

Name of Employer Occupation  
Self-Employed Real Estate Developer

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 2 | 3 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** C4661209

Amount of Each Receipt this Period  
50.00

350.00

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

Mailing Address 338 E. 70th Street  
Apt 3A

City State Zip Code  
NY NY 10021

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

Name of Employer Occupation  
Dean of Comedy Production- Comedian/Producer  
s, Inc.

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 9 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** C4670960

Amount of Each Receipt this Period  
250.00

250.00

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

Mailing Address 8361 Dolfor Cv

City State Zip Code  
Burr Ridge IL 60527

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 4 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** C4669173

Amount of Each Receipt this Period  
500.00

500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **800.00**

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



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

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

FOR LINE NUMBER: PAGE 41 / 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Ellison for Congress

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

Mailing Address 6848 Didrikson Ln

City State Zip Code  
Woodridge IL 60517

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

Name of Employer Northern Trust Company Occupation Staff

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 9

**Transaction ID:** C4669223

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1634 Heatherwood Dr

City State Zip Code  
Troy MI 48098-2687

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

**Transaction ID:** C4671446

Amount of Each Receipt this Period  
500.00

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

Mailing Address 110 Bank St SE Apt 1801

City State Zip Code  
Minneapolis MN 55414-3900

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

Name of Employer Robins, Kaplan, Miller & Ciresi Occupation Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 9

**Transaction ID:** C4672255

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2000.00**

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

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

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

FOR LINE NUMBER: PAGE 42 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

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

Mailing Address 80 S 8th Street  
Ste 4545

City State Zip Code  
Minneapolis MN 55402

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

Name of Employer Ravich Meyer Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 9

**Transaction ID:** C4651118

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Safa M. Rifka, MD

Mailing Address 3049 Normanstone Terr NW

City State Zip Code  
Washington DC 20008-2731

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 7 / 2 0 0 9

**Transaction ID:** C4665362

Amount of Each Receipt this Period  
500.00

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

Mailing Address 181 River Ridge S

City State Zip Code  
Burnsville MN 55337

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 4 / 2 0 0 9

**Transaction ID:** C4661391

Amount of Each Receipt this Period  
2400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3400.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 108

(check only one)

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

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)  
Ellison for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Melanie Rixmann

Mailing Address 181 River Ridge S

City State Zip Code  
Burnsville MN 55337

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 4800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 4 / 2 0 0 9

Transaction ID: C4661390

Amount of Each Receipt this Period

2400.00

**B.**

Full Name (Last, First, Middle Initial)  
Weldon J. Rougeau

Mailing Address 1101 Connecticut Ave NW  
Suite 600

City State Zip Code  
Washington DC 20036-5308

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

Name of Employer Occupation  
Arent Fox LLP Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: C4654285

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Rania Salem

Mailing Address 1603 Woodland Ln

City State Zip Code  
Bolingbrook IL 60490

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 9

Transaction ID: C4669219

Amount of Each Receipt this Period

1000.00

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

3900.00

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

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

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

FOR LINE NUMBER: PAGE 44 / 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Ellison for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Dilara Alim Sayeed

Mailing Address 23W365 Pelham Ct

City Naperville State IL Zip Code 60540

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

Name of Employer Village of Naperville Occupation Teacher

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 12 / 14 / 2009  
**Transaction ID: C4669176**  
Amount of Each Receipt this Period 500.00

**B.**

Full Name (Last, First, Middle Initial)  
Yousuf Sayeed

Mailing Address 23w365 Pelham Court

City Naperville State IL Zip Code 60540

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 12 / 14 / 2009  
**Transaction ID: C4669174**  
Amount of Each Receipt this Period 500.00

**C.**

Full Name (Last, First, Middle Initial)  
Shakopee Mdewankanton Sioux Community

Mailing Address 2330 Sioux Trl NW

City Prior Lake State MN Zip Code 55372-9077

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 12 / 04 / 2009  
**Transaction ID: C4664396**  
Amount of Each Receipt this Period 2400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3400.00**

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

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

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

FOR LINE NUMBER: PAGE 45 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

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

Mailing Address 2697 Briarwood Lane

City State Zip Code  
Glenview IL 60025

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

Name of Employer Occupation  
Tyler Technology, Inc President, Education Division

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 9

**Transaction ID:** C4669449

Amount of Each Receipt this Period  
1000.00

1000.00

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

Mailing Address 3305 31st Ave NE

City State Zip Code  
Minneapolis MN 55418-2520

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 9

**Transaction ID:** C4618345

Amount of Each Receipt this Period  
200.00

400.00

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

Mailing Address 17038 Patricia Lane

City State Zip Code  
Minnetonka MN 55345

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

Name of Employer Occupation  
Remax Realtor

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 4 / 2 0 0 9

**Transaction ID:** C4661420

Amount of Each Receipt this Period  
500.00

500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1700.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

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

Mailing Address 132 W. Rustic Lodge Ave.

City State Zip Code  
Minneapolis MN 55419-5541

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

Name of Employer Occupation  
Dorsey & Whitney LLP Lawyer

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 2 | 4 | / | 2 | 0 | 9 |   |

**Transaction ID:** C4661417

Amount of Each Receipt this Period  
250.00

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

Mailing Address 3625 Gettysburg Ave  
No. 82

City State Zip Code  
St. Louis Park MN 55426

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 1 | / | 2 | 0 | 9 |   |

**Transaction ID:** C4667619

Amount of Each Receipt this Period  
200.00

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

Mailing Address 6130 Maben Wood Ln

City State Zip Code  
Canton MI 48187

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

Name of Employer Occupation  
Michigan Medical Group, PC Physician

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 2 | 1 | / | 2 | 0 | 9 |   |

**Transaction ID:** C4671197

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 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 108

(check only one)

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

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)  
Ellison for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Ahmad Tawwab

Mailing Address 2306 Little Aston Way

City State Zip Code  
Stockton CA 95206

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 275.00

Date of Receipt

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

Transaction ID: C4666777

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Mary M Tjosvold

Mailing Address 11800 Xeon Blvd NW

City State Zip Code  
Minneapolis MN 55448

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

Name of Employer Occupation  
Mary T Inc. Business Owner

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00

Date of Receipt

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

Transaction ID: C4621880

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Reed Tuckson

Mailing Address 3501 Zenith Ave S

City State Zip Code  
Minneapolis MN 55416

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

Name of Employer Occupation  
United Health Group Physician

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: C4656917

Amount of Each Receipt this Period

500.00

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

850.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 108

(check only one)

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

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)  
Ellison for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Upper Sioux Community

Mailing Address PO Box 147

City State Zip Code  
Granite Falls MN 56241

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

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

Transaction ID: C4663145

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
White Earth Band Of Chippewa Indians

Mailing Address PO Box 418

City State Zip Code  
White Earth MN 56591-0418

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 4 / 2 0 0 9

Transaction ID: C4661437

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Phyllis Wiener

Mailing Address 4028 Elliot Ave S

City State Zip Code  
Minneapolis MN 55407

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

Name of Employer Occupation  
Planned Parenthood MN Nurse Practitioner

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: C4673933

Amount of Each Receipt this Period

2400.00

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

3400.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

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

Mailing Address 2222 Victory Memorial Dr.

City State Zip Code  
Minneapolis MN 55412

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

Name of Employer Willdell, LLC Occupation Dentist

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

**Transaction ID:** C4669696

Amount of Each Receipt this Period  
300.00

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

Mailing Address 700 S 2nd St  
Apt. 100

City State Zip Code  
Minneapolis MN 55401

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

Name of Employer N/A Occupation None

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

**Transaction ID:** C4672489

Amount of Each Receipt this Period  
250.00

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

Mailing Address 5823 S Garfield Ave

City State Zip Code  
Hinsdale IL 60521

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

Name of Employer Pulmonary Consultants Occupation Senior Vice President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 4 | / | 2 | 0 | 0 | 9 |

**Transaction ID:** C4669039

Amount of Each Receipt this Period  
500.00

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

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

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

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

FOR LINE NUMBER: PAGE 50 / 108  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
Ellison for Congress

|  |  |   |   |                                    |                                 |   |        |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|--|--|---|---|------------------------------------|---------------------------------|---|--------|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b>  | Full Name (Last, First, Middle Initial)<br>Safaa Zarzour |   | Date of Receipt   |                                    |                                 |   |        |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|  | Mailing Address 9154 Southfiled Dr.                      |   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> |                                    | M                               | M | /      | D | D | / | Y | Y | Y | Y | 1 | 2 |  | 1 | 4 |  | 2 | 0 | 0 | 9 |
|  | M  | M   | /   | D                                  | D                               | / | Y      | Y | Y | Y |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|  | 1  | 2   |   | 1                                  | 4                               |   | 2      | 0 | 0 | 9 |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|  | City   | State   | Zip Code  |                                    | <b>Transaction ID:</b> C4668973 |   |        |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Bridgeview   | IL   | 60455   |   |                                    |                                 |   |        |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| FEC ID number of contributing federal political committee.   |  | C   |   | Amount of Each Receipt this Period |                                 |   |        |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|  |  |   |   | 250.00                             |                                 |   |        |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Name of Employer<br>Self-Employed  |  | Occupation<br>Attorney  |   |                                    |                                 |   |        |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Receipt For:      2010   |  | Election Cycle-to-Date ▼  |   |                                    |                                 |   |        |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | <table border="1"> <tr> <td colspan="2"></td><td colspan="2">250.00</td> </tr> </table> |   |                                    |                                 |   | 250.00 |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|  |  | 250.00  |   |                                    |                                 |   |        |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

|  |   |                 |
|--|---|-----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | <b>250.00</b>   |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | <b>74170.00</b> |

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

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

FOR LINE NUMBER: PAGE 51 / 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Ellison for Congress

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN FEDERATION OF STATE, COUNTY AND MUNICIPAL

Mailing Address 1625 L STREET, N.W.

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C70000120

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 2 2 / 2 0 0 9

**Transaction ID:** C4671604

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN FEDERATION OF TEACHERS

Mailing Address 555 NEW JERSEY AVE., NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C70002472

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 1 6 / 2 0 0 9

**Transaction ID:** C4669884

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

Mailing Address Palladian 1  
220 Leigh Farm Rd

City Durham State NC Zip Code 27707

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1897.22

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 0 4 / 2 0 0 9

**Transaction ID:** C4677218

Amount of Each Receipt this Period  
 397.22

\* In-Kind: Food, Room Rent & Parking for Event

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3897.22

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

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

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

FOR LINE NUMBER: PAGE 52 / 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Ellison for Congress

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

Mailing Address Palladian 1  
220 Leigh Farm Rd

City Durham State NC Zip Code 27707

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1897.22

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 2 1 / 2 0 0 9

**Transaction ID:** C4671471

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE

Mailing Address 1111 North Fairfax Street

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 3 0 / 2 0 0 9

**Transaction ID:** C4651605

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
COMCAST CORP. POLITICAL ACTION COMMITTEE

Mailing Address 1500 Market Street  
35th Floor

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 2 1 / 2 0 0 9

**Transaction ID:** C4671467

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

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

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

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

FOR LINE NUMBER: PAGE 53 / 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Ellison for Congress

**A.** Full Name (Last, First, Middle Initial)  
DORSEY NATIONAL FUND

Mailing Address 50 South Sixth Street

City State Zip Code  
Minneapolis MN 55402

FEC ID number of contributing federal political committee. **C** C00018945

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 2 4 / 2 0 0 9

**Transaction ID:** C4661433

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
DYKEMA GOSSETT FEDERAL PAC

Mailing Address 201 Townsend Street  
Suite 900

City State Zip Code  
Lansing MI 48933

FEC ID number of contributing federal political committee. **C** C00342113

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 3 0 / 2 0 0 9

**Transaction ID:** C4651606

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Faegre & Benson LLP Political Committee Fund

Mailing Address 2200 WELLS FARGO CENTER  
90 SOUTH SEVENTH STR

City State Zip Code  
MINNEAPOLIS MN 55402

FEC ID number of contributing federal political committee. **C** C00215491

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 2 4 / 2 0 0 9

**Transaction ID:** C4661429

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Ellison for Congress

**A.** Full Name (Last, First, Middle Initial)  
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1299 Pennsylvania Ave NW  
Suite 900W

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 6 / 2 0 0 9

**Transaction ID:** C4629160

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
HUMAN RIGHTS CAMPAIGN PAC

Mailing Address 1640 Rhode Island Avenue NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00235853

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 3 0 / 2 0 0 9

**Transaction ID:** C4651610

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 1615 L. St., NW  
Ste. 900

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 0 4 / 2 0 0 9

**Transaction ID:** C4664394

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

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

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

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

FOR LINE NUMBER: PAGE 55 / 108

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Ellison for Congress

**A.**

Full Name (Last, First, Middle Initial)  
INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTEREST

Mailing Address 1750 New York Ave NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00029447

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
12 / 21 / 2009

Transaction ID: C4671470

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES

Mailing Address 1750 New York Avenue NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00000885

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 09 / 2009

Transaction ID: C4615662

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)  
JSTREETPAC

Mailing Address PO Box 33106

City State Zip Code  
Washington DC 20033

FEC ID number of contributing federal political committee. **C** C00441949

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
97.01

Date of Receipt

M M / D D / Y Y Y Y  
12 / 28 / 2009

Transaction ID: C4672415

Amount of Each Receipt this Period

97.01

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

3597.01

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

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

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

FOR LINE NUMBER: PAGE 56 / 108

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Ellison for Congress

**A.**

Full Name (Last, First, Middle Initial)  
KPMG PARTNERS/PRINCIPALS & EMPLOYEES PAC

Mailing Address PO Box 18254

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 4 / 2 0 0 9

Transaction ID: C4661777

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)  
LOCKRIDGE GRINDAL NAUEN POLITICAL FUND

Mailing Address 100 WASHINGTON AVE SO SUITE 2200

City State Zip Code  
MINNEAPOLIS MN 55401

FEC ID number of contributing federal political committee. **C** C00167916

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5016.59

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 9

Transaction ID: C4651607

Amount of Each Receipt this Period

983.41

**C.**

Full Name (Last, First, Middle Initial)  
LOCKRIDGE GRINDAL NAUEN POLITICAL FUND

Mailing Address 100 WASHINGTON AVE SO SUITE 2200

City State Zip Code  
MINNEAPOLIS MN 55401

FEC ID number of contributing federal political committee. **C** C00167916

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5016.59

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 9

Transaction ID: C4651608

Amount of Each Receipt this Period

16.59

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

2500.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Ellison for Congress

**A.** Full Name (Last, First, Middle Initial)  
MEDTRONIC INC. MEDICAL TECHNOLOGY FUND

Mailing Address 1420 New York Avenue NW Suite 600

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00311878

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 9

**Transaction ID:** C4651609

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL COMMITTEE TO PRESERVE SOCIAL SECURITY & MEDICARE PAC

Mailing Address 10 G St. NE Suite 600

City State Zip Code  
Washington DC 20002

FEC ID number of contributing federal political committee. **C** C00172296

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 9

**Transaction ID:** C4669078

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 51 Madison Ave. Room 1109

City State Zip Code  
New York NY 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 0 / 2 0 0 9

**Transaction ID:** C4654281

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

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

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

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

FOR LINE NUMBER: PAGE 58 / 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Ellison for Congress

**A.** Full Name (Last, First, Middle Initial)  
PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE

Mailing Address 1301 K Street NW  
Suite 800W

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 0 2 / 2 0 0 9

**Transaction ID:** C4663186

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
SECURITIES INDUSTRY AND FINANCIAL MARKETS ASSOC.

Mailing Address 1101 New York Ave NW  
Ste 800

City Washington State DC Zip Code 20005-4279

FEC ID number of contributing federal political committee. **C** C00431312

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 2 1 / 2 0 0 9

**Transaction ID:** C4671473

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
UNITED PARCEL SERVICE INC. POLITICAL ACTION COMMITTEE

Mailing Address 55 Glenlake Parkway N.E.

City Atlanta State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 1 6 / 2 0 0 9

**Transaction ID:** C4669969

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

**TOTAL** This Period (last page this line number only) ..... ► **25494.23**

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|  |   |
|--|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Acorn Mini Storage</p> <p>Mailing Address 4652 Lyndale Ave N</p> <p>City Minneapolis State MN Zip Code 55412-1441</p> <p>Purpose of Disbursement<br/>Storage Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p><b>Transaction ID:</b> D245050</p> <p>Date of Disbursement<br/>10 / 01 / 2009</p> <p>Amount of Each Disbursement this Period<br/>180.00</p> <p>Category/Type</p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Acorn Mini Storage</p> <p>Mailing Address 4652 Lyndale Ave N</p> <p>City Minneapolis State MN Zip Code 55412-1441</p> <p>Purpose of Disbursement<br/>Storage Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p><b>Transaction ID:</b> D245051</p> <p>Date of Disbursement<br/>10 / 27 / 2009</p> <p>Amount of Each Disbursement this Period<br/>180.00</p> <p>Category/Type</p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Acorn Mini Storage</p> <p>Mailing Address 4652 Lyndale Ave N</p> <p>City Minneapolis State MN Zip Code 55412-1441</p> <p>Purpose of Disbursement<br/>Storage Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p><b>Transaction ID:</b> D249594</p> <p>Date of Disbursement<br/>12 / 04 / 2009</p> <p>Amount of Each Disbursement this Period<br/>180.00</p> <p>Category/Type</p> |

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

540.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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)  
Ellison for Congress

|   |   |
|---|---|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>Acorn Mini Storage<br>Mailing Address 4652 Lyndale Ave N<br>City Minneapolis State MN Zip Code 55412-1441<br>Purpose of Disbursement<br>Void Lost Check<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>State: District: | Transaction ID: D251838<br>Date of Disbursement<br>12 / 31 / 2009<br>Amount of Each Disbursement this Period<br>-180.00<br>Category/Type  |
|   | Full Name (Last, First, Middle Initial)<br>ActBlue Technical Services<br>Mailing Address P.O. Box 382110<br>City Cambridge State MA Zip Code 02238<br>Purpose of Disbursement<br>Credit Card Fees<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>State: District: |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>ActBlue Technical Services<br>Mailing Address P.O. Box 382110<br>City Cambridge State MA Zip Code 02238<br>Purpose of Disbursement<br>Credit Card Fees<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>State: District:  | Transaction ID: D251840<br>Date of Disbursement<br>11 / 30 / 2009<br>Amount of Each Disbursement this Period<br>6.20<br>Category/Type   |

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

-169.79

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

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

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|  |   |
|--|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>ActBlue Technical Services</p> <p>Mailing Address P.O. Box 382110</p> <p>City Cambridge State MA Zip Code 02238</p> <p>Purpose of Disbursement<br/>Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>  | <p><b>Transaction ID:</b> D251841<br/><b>Date of Disbursement:</b> 12 / 31 / 2009</p> <p>Amount of Each Disbursement this Period<br/>1.98</p>                             |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS</p> <p>Mailing Address Palladian 1<br/>220 Leigh Farm Rd</p> <p>City Durham State NC Zip Code 27707</p> <p>Purpose of Disbursement<br/>Food, Room Rent &amp; Parking for Event</p> <p>Candidate Name<br/>AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p><b>Transaction ID:</b> D250608<br/><b>Date of Disbursement:</b> 11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period<br/>397.22</p> <p>* In-Kind Received</p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>American Airlines</p> <p>Mailing Address PO Box 619612 MD 2400</p> <p>City DFW Airport State TX Zip Code 75261</p> <p>Purpose of Disbursement<br/>Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>   | <p><b>Transaction ID:</b> D249582<br/><b>Date of Disbursement:</b> 12 / 02 / 2009</p> <p>Amount of Each Disbursement this Period<br/>219.20</p>                           |

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

**618.40**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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)  
Ellison for Congress

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>American Airlines<br>Mailing Address PO Box 619612 MD 2400<br>City DFW Airport State TX Zip Code 75261<br>Purpose of Disbursement Travel<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼            | Transaction ID: D249583<br>Date of Disbursement<br>12 / 02 / 2009<br>Amount of Each Disbursement this Period<br>219.20<br>Category/Type |
| B. | Full Name (Last, First, Middle Initial)<br>American Bank of St. Paul<br>Mailing Address 1578 University Avenue West<br>City Saint Paul State MN Zip Code 55104<br>Purpose of Disbursement Rent<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D249592<br>Date of Disbursement<br>12 / 04 / 2009<br>Amount of Each Disbursement this Period<br>841.94<br>Category/Type |
| C. | Full Name (Last, First, Middle Initial)<br>American Bank of St. Paul<br>Mailing Address 1578 University Avenue West<br>City Saint Paul State MN Zip Code 55104<br>Purpose of Disbursement Rent<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D245055<br>Date of Disbursement<br>10 / 01 / 2009<br>Amount of Each Disbursement this Period<br>900.00<br>Category/Type |

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

1961.14

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

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

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

FOR LINE NUMBER:  
(check only one)

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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)  
Ellison for Congress

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>American Bank of St. Paul   | Transaction ID: D245056<br>Date of Disbursement  |
|    | Mailing Address 1578 University Avenue West  | <input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="09"/>                    |
|    | City Saint Paul State MN Zip Code 55104  | Amount of Each Disbursement this Period  |
|    | Purpose of Disbursement Rent   | <input type="text" value="900.00"/>  |
|    | Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>American Express  | Transaction ID: D245057<br>Date of Disbursement  |
|    | Mailing Address PO Box 53852   | <input type="text" value="10"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="09"/>                    |
|    | City Phoenix State AZ Zip Code 85072-3582  | Amount of Each Disbursement this Period  |
|    | Purpose of Disbursement Credit Card Fees   | <input type="text" value="4.95"/>  |
|    | Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>American Express  | Transaction ID: D245058<br>Date of Disbursement  |
|    | Mailing Address PO Box 53852   | <input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/>                    |
|    | City Phoenix State AZ Zip Code 85072-3582  | Amount of Each Disbursement this Period  |
|    | Purpose of Disbursement Credit Card Fees   | <input type="text" value="99.78"/>   |
|    | Candidate Name   | Category/Type  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

|  |                                      |
|--|--------------------------------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <input type="text" value="1004.73"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text"/>                 |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

A.

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

Transaction ID: D249580  
Date of Disbursement

Mailing Address PO Box 53852

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 1 |   | 2 | 0 | 0 | 9 |

City Phoenix State AZ Zip Code 85072-3582

Amount of Each Disbursement this Period

|      |
|------|
| 4.95 |
|------|

Purpose of Disbursement  
Credit Card Fees

|  |
|--|
|  |
|--|

Candidate Name

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

B.

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

Transaction ID: D249581  
Date of Disbursement

Mailing Address PO Box 53852

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 7 |   | 2 | 0 | 0 | 9 |

City Phoenix State AZ Zip Code 85072-3582

Amount of Each Disbursement this Period

|       |
|-------|
| 32.19 |
|-------|

Purpose of Disbursement  
Credit Card Fees

|  |
|--|
|  |
|--|

Candidate Name

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

C.

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

Transaction ID: D247310  
Date of Disbursement

Mailing Address PO Box 53852

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 2 |   | 2 | 0 | 0 | 9 |

City Phoenix State AZ Zip Code 85072-3582

Amount of Each Disbursement this Period

|      |
|------|
| 4.95 |
|------|

Purpose of Disbursement  
Credit Card Fees

|  |
|--|
|  |
|--|

Candidate Name

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

Office Sought:  House  Senate  President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

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

|       |
|-------|
| 42.09 |
|-------|

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

|  |
|--|
|  |
|--|



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|  |  |
|--|--|
| <p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>American Express</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3582</p> <p>Purpose of Disbursement<br/>Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>           | <p><b>Transaction ID:</b> D247311</p> <p>Date of Disbursement<br/>11 / 05 / 2009</p> <p>Amount of Each Disbursement this Period<br/>78.81</p> <p>Category/Type</p> |
| <p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Authorize.net</p> <p>Mailing Address 915 S 500 E Ste 200</p> <p>City American Fork State UT Zip Code 84003-3373</p> <p>Purpose of Disbursement<br/>Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D247316</p> <p>Date of Disbursement<br/>11 / 03 / 2009</p> <p>Amount of Each Disbursement this Period<br/>20.00</p> <p>Category/Type</p> |
| <p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Authorize.net</p> <p>Mailing Address 915 S 500 E Ste 200</p> <p>City American Fork State UT Zip Code 84003-3373</p> <p>Purpose of Disbursement<br/>Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D249584</p> <p>Date of Disbursement<br/>12 / 02 / 2009</p> <p>Amount of Each Disbursement this Period<br/>20.00</p> <p>Category/Type</p> |

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

118.81

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |        |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------|
| <p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Authorize.net</p> <p>Mailing Address 915 S 500 E<br/>Ste 200</p> <p>City American Fork State UT Zip Code 84003-3373</p> <p>Purpose of Disbursement<br/>Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | <p><b>Transaction ID:</b> D245065</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">20.00</td> </tr> </table> <p>Category/<br/>Type</p> <p>Disbursement For: 2010</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>  | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 | / | 0 | 2 | / | 2 | 0 | 0 | 9 | 20.00  |
| M   | M   | / | D | D | / | Y | Y | Y | Y |   |   |   |   |   |   |   |   |   |   |   |   |        |
| 1   | 0   | / | 0 | 2 | / | 2 | 0 | 0 | 9 |   |   |   |   |   |   |   |   |   |   |   |   |        |
| 20.00   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |        |
| <p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Anna G. Bregier</p> <p>Mailing Address 400 Selby Ave, #322</p> <p>City Saint Paul State MN Zip Code 55102</p> <p>Purpose of Disbursement<br/>Mileage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>                    | <p><b>Transaction ID:</b> D247317</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">129.20</td> </tr> </table> <p>Category/<br/>Type</p> <p>Disbursement For: 2010</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 1 | / | 0 | 5 | / | 2 | 0 | 0 | 9 | 129.20 |
| M   | M   | / | D | D | / | Y | Y | Y | Y |   |   |   |   |   |   |   |   |   |   |   |   |        |
| 1   | 1   | / | 0 | 5 | / | 2 | 0 | 0 | 9 |   |   |   |   |   |   |   |   |   |   |   |   |        |
| 129.20  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |        |
| <p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Anna G. Bregier</p> <p>Mailing Address 400 Selby Ave, #322</p> <p>City Saint Paul State MN Zip Code 55102</p> <p>Purpose of Disbursement<br/>Mileage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>                    | <p><b>Transaction ID:</b> D247318</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">33.77</td> </tr> </table> <p>Category/<br/>Type</p> <p>Disbursement For: 2010</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>  | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 1 | / | 2 | 1 | / | 2 | 0 | 0 | 9 | 33.77  |
| M   | M   | / | D | D | / | Y | Y | Y | Y |   |   |   |   |   |   |   |   |   |   |   |   |        |
| 1   | 1   | / | 2 | 1 | / | 2 | 0 | 0 | 9 |   |   |   |   |   |   |   |   |   |   |   |   |        |
| 33.77   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |        |

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

|               |
|---------------|
| <b>182.97</b> |
|---------------|

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

|  |
|--|
|  |
|--|

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|           |   |   |
|-----------|---|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Capital Accounting Services<br><hr/> Mailing Address 4190 Vinewood Lane, Ste 111-554<br><hr/> City Plymouth State MN Zip Code 55442<br><hr/> Purpose of Disbursement Accounting Services<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D247328<br>Date of Disbursement<br>11 / 09 / 2009<br><hr/> Amount of Each Disbursement this Period<br>925.00  |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Capital Accounting Services<br><hr/> Mailing Address 4190 Vinewood Lane, Ste 111-554<br><hr/> City Plymouth State MN Zip Code 55442<br><hr/> Purpose of Disbursement Accounting Services<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D249593<br>Date of Disbursement<br>12 / 04 / 2009<br><hr/> Amount of Each Disbursement this Period<br>500.00  |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Capital Accounting Services<br><hr/> Mailing Address 4190 Vinewood Lane, Ste 111-554<br><hr/> City Plymouth State MN Zip Code 55442<br><hr/> Purpose of Disbursement Accounting Services<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D249596<br>Date of Disbursement<br>12 / 16 / 2009<br><hr/> Amount of Each Disbursement this Period<br>1500.00 |

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

2925.00

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

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

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

FOR LINE NUMBER:  
(check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

A.

Full Name (Last, First, Middle Initial)  
Capital Accounting Services

Transaction ID: D245076  
Date of Disbursement

Mailing Address 4190 Vinewood Lane, Ste 111-554

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 9 |   | 2 | 0 | 0 | 9 |

City Plymouth State MN Zip Code 55442

Amount of Each Disbursement this Period

|        |
|--------|
| 925.00 |
|--------|

Purpose of Disbursement  
Accounting Services  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

B.

Full Name (Last, First, Middle Initial)  
CitiBank

Transaction ID: D251837  
Date of Disbursement

Mailing Address 399 Park Avenue

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 3 | 1 |   | 2 | 0 | 0 | 9 |

City New York State NY Zip Code 10043

Amount of Each Disbursement this Period

|        |
|--------|
| -12.87 |
|--------|

Purpose of Disbursement  
Void Lost Check  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

C.

Full Name (Last, First, Middle Initial)  
Digital Coordination

Transaction ID: D247335  
Date of Disbursement

Mailing Address 2929 University Ave SE  
Ste 110

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 4 |   | 2 | 0 | 0 | 9 |

City Minneapolis State MN Zip Code 55414-3687

Amount of Each Disbursement this Period

|        |
|--------|
| 375.00 |
|--------|

Purpose of Disbursement  
Computer Equipment  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

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

|         |
|---------|
| 1287.13 |
|---------|

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

|  |
|--|
|  |
|--|

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|  |  |
|--|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Digital Coordination</p> <p>Mailing Address 2929 University Ave SE<br/>Ste 110</p> <p>City Minneapolis State MN Zip Code 55414-3687</p> <p>Purpose of Disbursement Computer Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p><b>Transaction ID:</b> D245091</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="405.00"/></p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Express EMPS</p> <p>Mailing Address PO Box 6600</p> <p>City Hagerstown State MD Zip Code 21740-0000</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>                                   | <p><b>Transaction ID:</b> D245062</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="207.67"/></p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Express EMPS</p> <p>Mailing Address PO Box 6600</p> <p>City Hagerstown State MD Zip Code 21740-0000</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>                                   | <p><b>Transaction ID:</b> D245063</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="51.04"/></p>  |

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

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

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

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

FOR LINE NUMBER:  
(check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|    |   |  |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial)<br>Express EMPS<br><br>Mailing Address PO Box 6600<br><br>City Hagerstown State MD Zip Code 21740-0000<br><br>Purpose of Disbursement<br>Credit Card Fees<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>State: District: | Transaction ID: D247312<br>Date of Disbursement<br>11 / 03 / 2009<br><br>Amount of Each Disbursement this Period<br>34.95  |
| B. | Full Name (Last, First, Middle Initial)<br>Express EMPS<br><br>Mailing Address PO Box 6600<br><br>City Hagerstown State MD Zip Code 21740-0000<br><br>Purpose of Disbursement<br>Credit Card Fees<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>State: District: | Transaction ID: D247313<br>Date of Disbursement<br>11 / 04 / 2009<br><br>Amount of Each Disbursement this Period<br>116.24 |
| C. | Full Name (Last, First, Middle Initial)<br>Express EMPS<br><br>Mailing Address PO Box 6600<br><br>City Hagerstown State MD Zip Code 21740-0000<br><br>Purpose of Disbursement<br>Credit Card Fees<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>State: District: | Transaction ID: D247314<br>Date of Disbursement<br>11 / 04 / 2009<br><br>Amount of Each Disbursement this Period<br>159.30 |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>310.49</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |               |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|  |   |
|--|---|
| <p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Express EMPS</p> <p>Mailing Address PO Box 6600</p> <p>City Hagerstown State MD Zip Code 21740-0000</p> <p>Purpose of Disbursement<br/>Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D247315</p> <p>Date of Disbursement<br/>MM / DD / YYYY<br/>11 / 04 / 2009</p> <p>Amount of Each Disbursement this Period<br/>94.43</p>  |
| <p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Express EMPS</p> <p>Mailing Address PO Box 6600</p> <p>City Hagerstown State MD Zip Code 21740-0000</p> <p>Purpose of Disbursement<br/>Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D249608</p> <p>Date of Disbursement<br/>MM / DD / YYYY<br/>12 / 03 / 2009</p> <p>Amount of Each Disbursement this Period<br/>137.56</p> |
| <p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Impact Printing</p> <p>Mailing Address 1067 Rice St</p> <p>City Saint Paul State MN Zip Code 55117-4920</p> <p>Purpose of Disbursement<br/>Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>     | <p><b>Transaction ID:</b> D245060</p> <p>Date of Disbursement<br/>MM / DD / YYYY<br/>10 / 01 / 2009</p> <p>Amount of Each Disbursement this Period<br/>74.26</p>  |

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

306.25

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

A.

Full Name (Last, First, Middle Initial)  
Impact Printing

Mailing Address 1067 Rice St

City State Zip Code  
Saint Paul MN 55117-4920

Purpose of Disbursement  
Printing

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D245061  
Date of Disbursement

10 / 29 / 2009

Amount of Each Disbursement this Period

191.03

B.

Full Name (Last, First, Middle Initial)  
Intuit

Mailing Address 2632 Marine Way

City State Zip Code  
Mountain View CA 94043

Purpose of Disbursement  
Software

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D245066  
Date of Disbursement

10 / 07 / 2009

Amount of Each Disbursement this Period

34.95

C.

Full Name (Last, First, Middle Initial)  
Intuit

Mailing Address 2632 Marine Way

City State Zip Code  
Mountain View CA 94043

Purpose of Disbursement  
Software

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D249595  
Date of Disbursement

12 / 08 / 2009

Amount of Each Disbursement this Period

20.97

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

246.95

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|  |  |
|--|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Intuit</p> <p>Mailing Address 2632 Marine Way</p> <p>City Mountain View State CA Zip Code 94043</p> <p>Purpose of Disbursement Software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>                 | <p><b>Transaction ID:</b> D247330</p> <p>Date of Disbursement<br/>11 / 12 / 2009</p> <p>Amount of Each Disbursement this Period<br/>34.95</p> <p>Category/Type</p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>ipHouse</p> <p>Mailing Address 331 2nd Ave S, Suite 540</p> <p>City Minneapolis State MN Zip Code 55401</p> <p>Purpose of Disbursement Computer Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D247334</p> <p>Date of Disbursement<br/>11 / 21 / 2009</p> <p>Amount of Each Disbursement this Period<br/>65.00</p> <p>Category/Type</p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>ipHouse</p> <p>Mailing Address 331 2nd Ave S, Suite 540</p> <p>City Minneapolis State MN Zip Code 55401</p> <p>Purpose of Disbursement Computer Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D245083</p> <p>Date of Disbursement<br/>10 / 16 / 2009</p> <p>Amount of Each Disbursement this Period<br/>65.00</p> <p>Category/Type</p> |

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

164.95

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|           |   |   |
|-----------|---|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Lunds<br><br>Mailing Address 25 University Ave SE<br><br>City Minneapolis State MN Zip Code 55414-1020<br><br>Purpose of Disbursement<br>Event Expense<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>State: District:       | <b>Transaction ID:</b> D245096<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 0 / 3 1 / 2 0 0 9<br><br>Amount of Each Disbursement this Period<br>50.56   |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Mal Warwick Associates<br><br>Mailing Address 2550 9th St Ste 103<br><br>City Berkeley State CA Zip Code 94710<br><br>Purpose of Disbursement<br>Direct Mail<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>State: District: | <b>Transaction ID:</b> D245086<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 0 / 2 2 / 2 0 0 9<br><br>Amount of Each Disbursement this Period<br>2000.00 |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Mal Warwick Associates<br><br>Mailing Address 2550 9th St Ste 103<br><br>City Berkeley State CA Zip Code 94710<br><br>Purpose of Disbursement<br>Direct Mail<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>State: District: | <b>Transaction ID:</b> D245052<br><b>Date of Disbursement</b><br>M M / D D / Y Y Y Y<br>1 0 / 0 1 / 2 0 0 9<br><br>Amount of Each Disbursement this Period<br>6602.72 |

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

**8653.28**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

A.

Full Name (Last, First, Middle Initial)  
Mal Warwick Associates

Mailing Address 2550 9th St Ste 103

City Berkeley State CA Zip Code 94710

Purpose of Disbursement  
Direct Mail

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D245053  
Date of Disbursement

10 / 29 / 2009

Amount of Each Disbursement this Period

48375.00

B.

Full Name (Last, First, Middle Initial)  
National Democratic Club

Mailing Address 30 Ivy St SE

City Washington State DC Zip Code 20003-4006

Purpose of Disbursement  
Membership Dues

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D245080  
Date of Disbursement

10 / 16 / 2009

Amount of Each Disbursement this Period

40.00

C.

Full Name (Last, First, Middle Initial)  
National Democratic Club

Mailing Address 30 Ivy St SE

City Washington State DC Zip Code 20003-4006

Purpose of Disbursement  
Membership Dues

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D247320  
Date of Disbursement

11 / 09 / 2009

Amount of Each Disbursement this Period

40.00

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

48455.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|           |  |   |
|-----------|--|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>National Democratic Club<br><br>Mailing Address 30 Ivy St SE<br><br>City Washington State DC Zip Code 20003-4006<br><br>Purpose of Disbursement<br>Event Expense - Food and Beverages<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D247321<br>Date of Disbursement<br>11 / 09 / 2009<br><br>Amount of Each Disbursement this Period<br>467.33  |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>NGP Software Inc<br><br>Mailing Address 1225 Eye St NW Ste 1225<br><br>City Washington State DC Zip Code 20005<br><br>Purpose of Disbursement<br>Campaign Software & Support<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼          | Transaction ID: D249591<br>Date of Disbursement<br>12 / 04 / 2009<br><br>Amount of Each Disbursement this Period<br>2100.00 |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>NGP Software Inc<br><br>Mailing Address 1225 Eye St NW Ste 1225<br><br>City Washington State DC Zip Code 20005<br><br>Purpose of Disbursement<br>Campaign Software & Support<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼          | Transaction ID: D245095<br>Date of Disbursement<br>10 / 29 / 2009<br><br>Amount of Each Disbursement this Period<br>530.00  |

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

3097.33

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|   |   |
|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Office Max</p> <p>Mailing Address 1490 University Ave W</p> <p>City Saint Paul State MN Zip Code 55104-3901</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p><b>Transaction ID:</b> D245089</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.84"/></p> <p>Category/Type</p>  |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Postmaster</p> <p>Mailing Address 2306 Lowry Ave N</p> <p>City Minneapolis State MN Zip Code 55411-1008</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>             | <p><b>Transaction ID:</b> D245084</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="44.00"/></p> <p>Category/Type</p>  |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Postmaster</p> <p>Mailing Address 2306 Lowry Ave N</p> <p>City Minneapolis State MN Zip Code 55411-1008</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>             | <p><b>Transaction ID:</b> D245085</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="484.00"/></p> <p>Category/Type</p> |

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

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|  |   |
|--|---|
| <p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Postmaster</p> <p>Mailing Address 2306 Lowry Ave N</p> <p>City Minneapolis State MN Zip Code 55411-1008</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D249586</p> <p>Date of Disbursement<br/>M M / D D / Y Y Y Y<br/>1 2 / 0 4 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period<br/>88.00</p>  |
| <p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Postmaster</p> <p>Mailing Address 2306 Lowry Ave N</p> <p>City Minneapolis State MN Zip Code 55411-1008</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D249587</p> <p>Date of Disbursement<br/>M M / D D / Y Y Y Y<br/>1 2 / 1 1 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period<br/>960.30</p> |
| <p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Postmaster</p> <p>Mailing Address 2306 Lowry Ave N</p> <p>City Minneapolis State MN Zip Code 55411-1008</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D249588</p> <p>Date of Disbursement<br/>M M / D D / Y Y Y Y<br/>1 2 / 2 3 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period<br/>44.00</p>  |

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

1092.30

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

A.

Full Name (Last, First, Middle Initial)  
Postmaster

Mailing Address 2306 Lowry Ave N

City Minneapolis State MN Zip Code 55411-1008

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D249589  
Date of Disbursement

12 / 24 / 2009

Amount of Each Disbursement this Period

88.00

B.

Full Name (Last, First, Middle Initial)  
Postmaster

Mailing Address 2306 Lowry Ave N

City Minneapolis State MN Zip Code 55411-1008

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D247324  
Date of Disbursement

11 / 09 / 2009

Amount of Each Disbursement this Period

264.00

C.

Full Name (Last, First, Middle Initial)  
Quill

Mailing Address PO Box 37600

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement  
Office Supplies

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D245094  
Date of Disbursement

10 / 29 / 2009

Amount of Each Disbursement this Period

189.76

SUBTOTAL of Disbursements This Page (optional) ▶

541.76

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|   |  |
|---|--|
| <p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Qwest Communications</p> <p>Mailing Address PO Box 17360</p> <p>City Denver State CO Zip Code 80217</p> <p>Purpose of Disbursement Telephone<br/>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>        | <p><b>Transaction ID:</b> D245082</p> <p>Date of Disbursement<br/>10 / 16 / 2009</p> <p>Amount of Each Disbursement this Period<br/>109.54</p> |
| <p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Qwest Communications</p> <p>Mailing Address PO Box 17360</p> <p>City Denver State CO Zip Code 80217</p> <p>Purpose of Disbursement Telephone<br/>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>        | <p><b>Transaction ID:</b> D247333</p> <p>Date of Disbursement<br/>11 / 21 / 2009</p> <p>Amount of Each Disbursement this Period<br/>109.54</p> |
| <p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Rainbow Foods</p> <p>Mailing Address 2919 26th Ave S</p> <p>City Minneapolis State MN Zip Code 55406</p> <p>Purpose of Disbursement Office Supplies<br/>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D249600</p> <p>Date of Disbursement<br/>12 / 19 / 2009</p> <p>Amount of Each Disbursement this Period<br/>8.79</p>   |

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

227.87

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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)  
Ellison for Congress

|           |  |   |
|-----------|--|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Rainbow Foods<br><br>Mailing Address 2919 26th Ave S<br><br>City Minneapolis State MN Zip Code 55406<br><br>Purpose of Disbursement Office Supplies<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D245078<br>Date of Disbursement<br>10 / 09 / 2009<br><br>Amount of Each Disbursement this Period<br>5.38  |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Rainbow Foods<br><br>Mailing Address 2919 26th Ave S<br><br>City Minneapolis State MN Zip Code 55406<br><br>Purpose of Disbursement Office Supplies<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D245097<br>Date of Disbursement<br>10 / 31 / 2009<br><br>Amount of Each Disbursement this Period<br>62.71 |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Matt Roznowski<br><br>Mailing Address 803 Douglas Ave Apt #4<br><br>City Minneapolis State MN Zip Code 55403<br><br>Purpose of Disbursement Mileage<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D245073<br>Date of Disbursement<br>10 / 09 / 2009<br><br>Amount of Each Disbursement this Period<br>51.60 |

|  |             |
|--|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | 119.69      |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ | (Empty box) |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|   |   |
|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Matt Roznowski</p> <p>Mailing Address 803 Douglas Ave<br/>Apt #4</p> <p>City Minneapolis State MN Zip Code 55403</p> <p>Purpose of Disbursement<br/>Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>                           | <p><b>Transaction ID:</b> D245074</p> <p>Date of Disbursement<br/>10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period<br/>8.00</p>    |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Sinfully Wright Catering</p> <p>Mailing Address 1901 Trenton Place SE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement<br/>Event Expense - Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>     | <p><b>Transaction ID:</b> D245068</p> <p>Date of Disbursement<br/>10 / 08 / 2009</p> <p>Amount of Each Disbursement this Period<br/>1650.00</p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Sutter's Mill Fundraising</p> <p>Mailing Address 499 S Capitol St SW #404</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement<br/>Consulting - Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p><b>Transaction ID:</b> D245079</p> <p>Date of Disbursement<br/>10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period<br/>3069.29</p> |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>4727.29</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |                |

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

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

FOR LINE NUMBER:  
(check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>Sutter's Mill Fundraising   | Transaction ID: D247326<br>Date of Disbursement<br>11 / 09 / 2009 |
|    | Mailing Address 499 S Capitol St SW #404   | Amount of Each Disbursement this Period<br>3087.30                |
|    | City Washington State DC Zip Code 20003  |   |
|    | Purpose of Disbursement Consulting - Fundraising   | Category/Type   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

|    |  |   |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial)<br>T-Mobile  | Transaction ID: D245048<br>Date of Disbursement<br>10 / 01 / 2009 |
|    | Mailing Address PO Box 790047  | Amount of Each Disbursement this Period<br>142.37                 |
|    | City St Louis State MO Zip Code 63179-0047   |   |
|    | Purpose of Disbursement Telephone  | Category/Type   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br>T-Mobile  | Transaction ID: D245049<br>Date of Disbursement<br>10 / 27 / 2009 |
|    | Mailing Address PO Box 790047  | Amount of Each Disbursement this Period<br>141.92                 |
|    | City St Louis State MO Zip Code 63179-0047   |   |
|    | Purpose of Disbursement Telephone  | Category/Type   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

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

3371.59

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|   |  |
|---|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Union Resource</p> <p>Mailing Address 2975 Lone Oak Circle, #201</p> <p>City Saint Paul State MN Zip Code 55121</p> <p>Purpose of Disbursement Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>                     | <p><b>Transaction ID:</b> D245054</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="195.00"/></p> <p>Category/Type</p>  |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>University of Minnesota</p> <p>Mailing Address 300 Washington Ave. SE</p> <p>City Minneapolis State MN Zip Code 55414</p> <p>Purpose of Disbursement Event Expense - Athletics</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p><b>Transaction ID:</b> D245069</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> <p>Category/Type</p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>University of Minnesota</p> <p>Mailing Address 300 Washington Ave. SE</p> <p>City Minneapolis State MN Zip Code 55414</p> <p>Purpose of Disbursement Event Expense - Athletics</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p><b>Transaction ID:</b> D245070</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="220.00"/></p> <p>Category/Type</p>  |

|   |   |
|---|---|
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>      | <p><input type="text" value="5415.00"/></p> |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</p> | <p><input type="text"/></p>                 |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|  |  |
|--|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>University of Minnesota</p> <p>Mailing Address 300 Washington Ave. SE</p> <p>City Minneapolis State MN Zip Code 55414</p> <p>Purpose of Disbursement<br/>Event Expense - Athletics</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D245071</p> <p>Date of Disbursement<br/>10 / 28 / 2009</p> <p>Amount of Each Disbursement this Period<br/>100.00</p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>University of Minnesota</p> <p>Mailing Address 300 Washington Ave. SE</p> <p>City Minneapolis State MN Zip Code 55414</p> <p>Purpose of Disbursement<br/>Event Expense - Athletics</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D247322</p> <p>Date of Disbursement<br/>11 / 09 / 2009</p> <p>Amount of Each Disbursement this Period<br/>794.84</p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>University of Minnesota</p> <p>Mailing Address 300 Washington Ave. SE</p> <p>City Minneapolis State MN Zip Code 55414</p> <p>Purpose of Disbursement<br/>Event Expense - Athletics</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D247323</p> <p>Date of Disbursement<br/>11 / 09 / 2009</p> <p>Amount of Each Disbursement this Period<br/>32.68</p>  |

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

927.52

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

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

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|           |   |   |
|-----------|---|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Verizon Wireless<br>Mailing Address PO Box 25505<br>City Lehigh Valley State PA Zip Code 18002-5505<br>Purpose of Disbursement Telephone<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: | Transaction ID: D247325<br>Date of Disbursement<br>11 / 09 / 2009<br>Amount of Each Disbursement this Period<br>272.85<br>Category/Type |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Verizon Wireless<br>Mailing Address PO Box 25505<br>City Lehigh Valley State PA Zip Code 18002-5505<br>Purpose of Disbursement Telephone<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: | Transaction ID: D249597<br>Date of Disbursement<br>12 / 16 / 2009<br>Amount of Each Disbursement this Period<br>271.35<br>Category/Type |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Verizon Wireless<br>Mailing Address PO Box 25505<br>City Lehigh Valley State PA Zip Code 18002-5505<br>Purpose of Disbursement Telephone<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: | Transaction ID: D245072<br>Date of Disbursement<br>10 / 09 / 2009<br>Amount of Each Disbursement this Period<br>271.44<br>Category/Type |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶      | <b>815.64</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... ▶ |               |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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)  
Ellison for Congress

|           |  |   |  |
|-----------|--|---|--|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Vonage<br>Mailing Address 23 Main Street<br>City Holmdel State NJ Zip Code 07733<br>Purpose of Disbursement Telephone<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: | <b>Transaction ID:</b> D245087<br><b>Date of Disbursement</b><br>10 / 26 / 2009 | Amount of Each Disbursement this Period<br>66.62 |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Vonage<br>Mailing Address 23 Main Street<br>City Holmdel State NJ Zip Code 07733<br>Purpose of Disbursement Telephone<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: | <b>Transaction ID:</b> D249603<br><b>Date of Disbursement</b><br>12 / 26 / 2009 | Amount of Each Disbursement this Period<br>66.62 |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Vonage<br>Mailing Address 23 Main Street<br>City Holmdel State NJ Zip Code 07733<br>Purpose of Disbursement Telephone<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>State: District: | <b>Transaction ID:</b> D249604<br><b>Date of Disbursement</b><br>12 / 02 / 2009 | Amount of Each Disbursement this Period<br>66.62 |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>199.86</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

**A.** Full Name (Last, First, Middle Initial)  
Minnesota Democratic Farmer Labor Party

Mailing Address 255 E Plato Blvd

City State Zip Code  
Saint Paul MN 55102

Purpose of Disbursement  
See Memo Entries

Candidate Name  
Minnesota Democratic Farmer Labor Party

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D245033  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

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

Mailing Address 400 Selby Ave, #322

City State Zip Code  
Saint Paul MN 55102

Purpose of Disbursement  
Payroll

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D245034  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
EFTPS - US Treasury

Mailing Address PO Box 173788

City State Zip Code  
Denver CO 80217

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D245037  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

[MEMO ITEM]

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

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|  |   |
|--|---|
| <p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>MN Department of Economic Security</p> <p>Mailing Address PO Box 1705</p> <p>City Saint Paul State MN Zip Code 55101</p> <p>Purpose of Disbursement<br/>Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D245039</p> <p>Date of Disbursement<br/>10 / 23 / 2009</p> <p>Amount of Each Disbursement this Period<br/>29.72</p> <p>[MEMO ITEM]</p>  |
| <p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>MN Department of Revenue</p> <p>Mailing Address Mail Station 1173</p> <p>City Saint Paul State MN Zip Code 55146</p> <p>Purpose of Disbursement<br/>Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>     | <p><b>Transaction ID:</b> D245038</p> <p>Date of Disbursement<br/>10 / 23 / 2009</p> <p>Amount of Each Disbursement this Period<br/>241.00</p> <p>[MEMO ITEM]</p> |
| <p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial)<br/>Matt Roznowski</p> <p>Mailing Address 803 Douglas Ave Apt #4</p> <p>City Minneapolis State MN Zip Code 55403</p> <p>Purpose of Disbursement<br/>Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>               | <p><b>Transaction ID:</b> D245035</p> <p>Date of Disbursement<br/>10 / 23 / 2009</p> <p>Amount of Each Disbursement this Period<br/>800.99</p> <p>[MEMO ITEM]</p> |

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

0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

A.

Full Name (Last, First, Middle Initial)  
David Wakely

Mailing Address 1151 Hamline Ave N

City State Zip Code  
Saint Paul MN 55108-2613

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D245036  
Date of Disbursement

10 / 23 / 2009

Amount of Each Disbursement this Period

1413.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Minnesota Democratic Farmer Labor Party

Mailing Address 255 E Plato Blvd

City State Zip Code  
Saint Paul MN 55102

Purpose of Disbursement  
See Memo Entries

Candidate Name  
Minnesota Democratic Farmer Labor Party

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D245040  
Date of Disbursement

10 / 09 / 2009

Amount of Each Disbursement this Period

5378.52

C.

Full Name (Last, First, Middle Initial)  
Anna G. Bregier

Mailing Address 400 Selby Ave, #322

City State Zip Code  
Saint Paul MN 55102

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D245044  
Date of Disbursement

10 / 09 / 2009

Amount of Each Disbursement this Period

1588.00

[MEMO ITEM]

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

5378.52

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|   |   |
|---|---|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>EFTPS - US Treasury</p> <p>Mailing Address PO Box 173788</p> <p>City Denver State CO Zip Code 80217</p> <p>Purpose of Disbursement<br/>Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>                  | <p><b>Transaction ID:</b> D245041<br/><b>Date of Disbursement</b><br/>10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period<br/>1305.81</p> <p><b>[MEMO ITEM]</b></p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>MN Department of Economic Security</p> <p>Mailing Address PO Box 1705</p> <p>City Saint Paul State MN Zip Code 55101</p> <p>Purpose of Disbursement<br/>Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D245043<br/><b>Date of Disbursement</b><br/>10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period<br/>29.73</p> <p><b>[MEMO ITEM]</b></p>   |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>MN Department of Revenue</p> <p>Mailing Address Mail Station 1173</p> <p>City Saint Paul State MN Zip Code 55146</p> <p>Purpose of Disbursement<br/>Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>     | <p><b>Transaction ID:</b> D245042<br/><b>Date of Disbursement</b><br/>10 / 09 / 2009</p> <p>Amount of Each Disbursement this Period<br/>241.00</p> <p><b>[MEMO ITEM]</b></p>  |

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

0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>Matt Roznowski  | Transaction ID: D245045<br>Date of Disbursement<br>10 / 09 / 2009 |
|    | Mailing Address 803 Douglas Ave Apt #4   | Amount of Each Disbursement this Period<br>800.98                 |
|    | City Minneapolis State MN Zip Code 55403   |   |
|    | Purpose of Disbursement Payroll  | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President                               |   |
|    | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

|    |  |   |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial)<br>David Wakely  | Transaction ID: D245046<br>Date of Disbursement<br>10 / 09 / 2009 |
|    | Mailing Address 1151 Hamline Ave N   | Amount of Each Disbursement this Period<br>1413.00                |
|    | City Saint Paul State MN Zip Code 55108-2613   |   |
|    | Purpose of Disbursement Payroll  | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President                               |   |
|    | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br>Anna G. Bregier   | Transaction ID: D245059<br>Date of Disbursement<br>10 / 01 / 2009 |
|    | Mailing Address 400 Selby Ave, #322  | Amount of Each Disbursement this Period<br>70.44                  |
|    | City Saint Paul State MN Zip Code 55102  |   |
|    | Purpose of Disbursement Mileage/See Memo Entries   | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President                               |   |
|    | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 70.44 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |       |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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)  
Ellison for Congress

|           |   |   |
|-----------|---|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Carla Kjellberg<br>Mailing Address 5001 Third Ave S.<br>City Minneapolis State MN Zip Code 55419<br>Purpose of Disbursement See Memo Entries<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼     | Transaction ID: D245067<br>Date of Disbursement<br>10 / 08 / 2009<br>Amount of Each Disbursement this Period<br>644.58<br>Category/Type                       |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Costco<br>Mailing Address 5801 W. 16th St.<br>City Minneapolis State MN Zip Code 55416<br>Purpose of Disbursement Event Expense<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                  | Transaction ID: D245100<br>Date of Disbursement<br>10 / 08 / 2009<br>Amount of Each Disbursement this Period<br>644.58<br>Category/Type<br><b>[MEMO ITEM]</b> |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Matt Roznowski<br>Mailing Address 803 Douglas Ave Apt #4<br>City Minneapolis State MN Zip Code 55403<br>Purpose of Disbursement See Memo Entries<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D245075<br>Date of Disbursement<br>10 / 22 / 2009<br>Amount of Each Disbursement this Period<br>67.30<br>Category/Type                        |

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

711.88

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

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

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|      |  |   |      |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|------|--|---|------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|
| A.   | Full Name (Last, First, Middle Initial)<br>Postmaster  | Transaction ID: D245101<br>Date of Disbursement   |      |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|      | Mailing Address 2306 Lowry Ave N   | <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table> | M    | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 |  | 2 | 2 |  | 2 | 0 | 9 |
| M    | M  | /   | D    | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |
| 1    | 0  |   | 2    | 2 |   | 2 | 0 | 9 |   |   |   |   |   |   |  |   |   |  |   |   |   |
|      | City Minneapolis State MN Zip Code 55411-1008  | Amount of Each Disbursement this Period   |      |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|      | Purpose of Disbursement Postage  | <table border="1"><tr><td>7.30</td></tr></table>  | 7.30 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
| 7.30 |  |   |      |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|      | Candidate Name   | Category/Type   |      |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|      | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President                               | [MEMO ITEM]   |      |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|      | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |      |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|      | State: District:   |   |      |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |

|       |  |   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|-------|--|---|-------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|
| B.    | Full Name (Last, First, Middle Initial)<br>John Slaight  | Transaction ID: D245088<br>Date of Disbursement   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|       | Mailing Address 2633 Girard Ave #203   | <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table> | M     | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 |  | 2 | 9 |  | 2 | 0 | 9 |
| M     | M  | /   | D     | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |
| 1     | 0  |   | 2     | 9 |   | 2 | 0 | 9 |   |   |   |   |   |   |  |   |   |  |   |   |   |
|       | City Minneapolis State MN Zip Code 55408   | Amount of Each Disbursement this Period   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|       | Purpose of Disbursement See Memo Entries   | <table border="1"><tr><td>17.22</td></tr></table>   | 17.22 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
| 17.22 |  |   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|       | Candidate Name   | Category/Type   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|       | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President                               | [MEMO ITEM]   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|       | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|       | State: District:   |   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |

|       |  |   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|-------|--|---|-------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|
| C.    | Full Name (Last, First, Middle Initial)<br>Office Max  | Transaction ID: D245090<br>Date of Disbursement   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|       | Mailing Address 1490 University Ave W  | <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table> | M     | M | / | D | D | / | Y | Y | Y | Y | 1 | 0 |  | 2 | 9 |  | 2 | 0 | 9 |
| M     | M  | /   | D     | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |
| 1     | 0  |   | 2     | 9 |   | 2 | 0 | 9 |   |   |   |   |   |   |  |   |   |  |   |   |   |
|       | City Saint Paul State MN Zip Code 55104-3901   | Amount of Each Disbursement this Period   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|       | Purpose of Disbursement Office Supplies  | <table border="1"><tr><td>17.22</td></tr></table>   | 17.22 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
| 17.22 |  |   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|       | Candidate Name   | Category/Type   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|       | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President                               | [MEMO ITEM]   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|       | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|       | State: District:   |   |       |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |

|  |   |       |
|--|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <table border="1"><tr><td>17.22</td></tr></table> | 17.22 |
| 17.22  |   |       |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <table border="1"><tr><td></td></tr></table>      |       |
|  |   |       |

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

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

FOR LINE NUMBER:  
(check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>Minnesota Democratic Farmer Labor Party   | Transaction ID: D245629<br>Date of Disbursement<br>11 / 20 / 2009 |
|    | Mailing Address 255 E Plato Blvd   | Amount of Each Disbursement this Period<br>4295.27                |
|    | City Saint Paul State MN Zip Code 55102  |   |
|    | Purpose of Disbursement See Memo Entries   | Category/<br>Type   |
|    | Candidate Name Minnesota Democratic Farmer Labor Party   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

|    |  |   |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial)<br>Anna G. Bregier   | Transaction ID: D245633<br>Date of Disbursement<br>11 / 20 / 2009 |
|    | Mailing Address 400 Selby Ave, #322  | Amount of Each Disbursement this Period<br>868.50                 |
|    | City Saint Paul State MN Zip Code 55102  |   |
|    | Purpose of Disbursement Payroll  | Category/<br>Type   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br>EFTPS - US Treasury   | Transaction ID: D245630<br>Date of Disbursement<br>11 / 20 / 2009 |
|    | Mailing Address PO Box 173788  | Amount of Each Disbursement this Period<br>1001.25                |
|    | City Denver State CO Zip Code 80217  |   |
|    | Purpose of Disbursement Payroll Taxes  | Category/<br>Type   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |   |
|    | State: District:   |   |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | 4295.27 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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)  
Ellison for Congress

|           |  |   |
|-----------|--|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>MN Department of Economic Security<br><hr/> Mailing Address PO Box 1705<br><hr/> City Saint Paul State MN Zip Code 55101<br><hr/> Purpose of Disbursement Payroll Taxes<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D245632<br>Date of Disbursement<br>11 / 20 / 2009<br><hr/> Amount of Each Disbursement this Period<br>28.53<br><hr/> [MEMO ITEM]  |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>MN Department of Revenue<br><hr/> Mailing Address Mail Station 1173<br><hr/> City Saint Paul State MN Zip Code 55146<br><hr/> Purpose of Disbursement Payroll Taxes<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼     | Transaction ID: D245631<br>Date of Disbursement<br>11 / 20 / 2009<br><hr/> Amount of Each Disbursement this Period<br>183.00<br><hr/> [MEMO ITEM] |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Matt Roznowski<br><hr/> Mailing Address 803 Douglas Ave Apt #4<br><hr/> City Minneapolis State MN Zip Code 55403<br><hr/> Purpose of Disbursement Payroll<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼               | Transaction ID: D245634<br>Date of Disbursement<br>11 / 20 / 2009<br><hr/> Amount of Each Disbursement this Period<br>800.99<br><hr/> [MEMO ITEM] |

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

0.00

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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)  
Ellison for Congress

A.

Full Name (Last, First, Middle Initial)  
David Wakely

Mailing Address 1151 Hamline Ave N

City State Zip Code  
Saint Paul MN 55108-2613

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D245635  
Date of Disbursement

11 / 20 / 2009

Amount of Each Disbursement this Period

1413.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
Minnesota Democratic Farmer Labor Party

Mailing Address 255 E Plato Blvd

City State Zip Code  
Saint Paul MN 55102

Purpose of Disbursement  
See Memo Entries

Candidate Name  
Minnesota Democratic Farmer Labor Party

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D245724  
Date of Disbursement

11 / 06 / 2009

Amount of Each Disbursement this Period

5378.54

C.

Full Name (Last, First, Middle Initial)  
Anna G. Bregier

Mailing Address 400 Selby Ave, #322

City State Zip Code  
Saint Paul MN 55102

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D245729  
Date of Disbursement

11 / 06 / 2009

Amount of Each Disbursement this Period

1588.00

[MEMO ITEM]

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

5378.54

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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)  
Ellison for Congress

|           |   |   |
|-----------|---|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>EFTPS - US Treasury<br><br>Mailing Address PO Box 173788<br><br>City Denver State CO Zip Code 80217<br><br>Purpose of Disbursement<br>Payroll Taxes<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                  | Transaction ID: D245725<br>Date of Disbursement<br>11 / 06 / 2009<br><br>Amount of Each Disbursement this Period<br>1305.81<br><br><b>[MEMO ITEM]</b> |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>MN Department of Economic Security<br><br>Mailing Address PO Box 1705<br><br>City Saint Paul State MN Zip Code 55101<br><br>Purpose of Disbursement<br>Payroll Taxes<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D245727<br>Date of Disbursement<br>11 / 06 / 2009<br><br>Amount of Each Disbursement this Period<br>29.75<br><br><b>[MEMO ITEM]</b>   |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>MN Department of Revenue<br><br>Mailing Address Mail Station 1173<br><br>City Saint Paul State MN Zip Code 55146<br><br>Purpose of Disbursement<br>Payroll Taxes<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼     | Transaction ID: D245726<br>Date of Disbursement<br>11 / 06 / 2009<br><br>Amount of Each Disbursement this Period<br>241.00<br><br><b>[MEMO ITEM]</b>  |

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

0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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)  
Ellison for Congress

|           |   |   |  |
|-----------|---|---|--|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Matt Roznowski<br><hr/> Mailing Address 803 Douglas Ave<br>Apt #4<br><hr/> City Minneapolis State MN Zip Code 55403<br><hr/> Purpose of Disbursement Payroll<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   | Transaction ID: D245730<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 6 / 2 0 0 9 | Amount of Each Disbursement this Period<br>800.98  |
|           |   |   | [MEMO ITEM]  |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>David Wakely<br><hr/> Mailing Address 1151 Hamline Ave N<br><hr/> City Saint Paul State MN Zip Code 55108-2613<br><hr/> Purpose of Disbursement Payroll<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  | Transaction ID: D245728<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 1 / 0 6 / 2 0 0 9 | Amount of Each Disbursement this Period<br>1413.00 |
|           |   |   | [MEMO ITEM]  |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Minnesota Democratic Farmer Labor Party<br><hr/> Mailing Address 255 E Plato Blvd<br><hr/> City Saint Paul State MN Zip Code 55102<br><hr/> Purpose of Disbursement See Memo Entries<br>Candidate Name Minnesota Democratic Farmer Labor Party<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D246384<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 2 / 0 4 / 2 0 0 9 | Amount of Each Disbursement this Period<br>3705.11 |

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

3705.11

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 100 / 108

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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)  
Ellison for Congress

|           |  |   |
|-----------|--|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Julia Donnelly<br><hr/> Mailing Address 1516 Iglehart Ave<br><hr/> City Saint Paul State MN Zip Code 55104<br><hr/> Purpose of Disbursement Payroll<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                     | Transaction ID: D247006<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 2 / 0 4 / 2 0 0 9<br><hr/> Amount of Each Disbursement this Period<br>406.34<br><hr/> [MEMO ITEM] |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>EFTPS - US Treasury<br><hr/> Mailing Address PO Box 173788<br><hr/> City Denver State CO Zip Code 80217<br><hr/> Purpose of Disbursement Payroll Taxes<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                  | Transaction ID: D246385<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 2 / 0 4 / 2 0 0 9<br><hr/> Amount of Each Disbursement this Period<br>891.96<br><hr/> [MEMO ITEM] |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>MN Department of Economic Security<br><hr/> Mailing Address PO Box 1705<br><hr/> City Saint Paul State MN Zip Code 55101<br><hr/> Purpose of Disbursement Payroll Taxes<br>Candidate Name<br><hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D246387<br>Date of Disbursement<br>M M / D D / Y Y Y Y<br>1 2 / 0 4 / 2 0 0 9<br><hr/> Amount of Each Disbursement this Period<br>39.83<br><hr/> [MEMO ITEM]  |

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 101 / 108

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>MN Department of Revenue  | Transaction ID: D246386<br>Date of Disbursement<br>12 / 04 / 2009 |
|    | Mailing Address Mail Station 1173  | Amount of Each Disbursement this Period<br>153.00                 |
|    | City Saint Paul State MN Zip Code 55146  |   |
|    | Purpose of Disbursement Payroll Taxes  | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                 |   |
|    | Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|    |  |   |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial)<br>Matt Roznowski  | Transaction ID: D246388<br>Date of Disbursement<br>12 / 04 / 2009 |
|    | Mailing Address 803 Douglas Ave Apt #4   | Amount of Each Disbursement this Period<br>800.98                 |
|    | City Minneapolis State MN Zip Code 55403   |   |
|    | Purpose of Disbursement Payroll  | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                 |   |
|    | Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br>David Wakely  | Transaction ID: D246389<br>Date of Disbursement<br>12 / 04 / 2009 |
|    | Mailing Address 1151 Hamline Ave N   | Amount of Each Disbursement this Period<br>1413.00                |
|    | City Saint Paul State MN Zip Code 55108-2613   |   |
|    | Purpose of Disbursement Payroll  | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                 |   |
|    | Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |      |
|--|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 0.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |      |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|  |  |
|--|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Minnesota Democratic Farmer Labor Party</p> <p>Mailing Address 255 E Plato Blvd</p> <p>City Saint Paul State MN Zip Code 55102</p> <p>Purpose of Disbursement See Memo Entries</p> <p>Candidate Name Minnesota Democratic Farmer Labor Party</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D247303</p> <p>Date of Disbursement<br/>12 / 18 / 2009</p> <p>Amount of Each Disbursement this Period<br/>4194.78</p>                          |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Julia Donnelly</p> <p>Mailing Address 1516 Iglehart Ave</p> <p>City Saint Paul State MN Zip Code 55104</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>  | <p><b>Transaction ID:</b> D247307</p> <p>Date of Disbursement<br/>12 / 18 / 2009</p> <p>Amount of Each Disbursement this Period<br/>812.68</p> <p><b>[MEMO ITEM]</b></p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>EFTPS - US Treasury</p> <p>Mailing Address PO Box 173788</p> <p>City Denver State CO Zip Code 80217</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>   | <p><b>Transaction ID:</b> D247304</p> <p>Date of Disbursement<br/>12 / 18 / 2009</p> <p>Amount of Each Disbursement this Period<br/>962.78</p> <p><b>[MEMO ITEM]</b></p> |

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

4194.78

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|   |  |
|---|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>MN Department of Economic Security</p> <p>Mailing Address PO Box 1705</p> <p>City Saint Paul State MN Zip Code 55101</p> <p>Purpose of Disbursement<br/>Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D247306<br/><b>Date of Disbursement</b><br/>12 / 18 / 2009</p> <p>Amount of Each Disbursement this Period<br/>52.33</p> <p><b>[MEMO ITEM]</b></p>  |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>MN Department of Revenue</p> <p>Mailing Address Mail Station 1173</p> <p>City Saint Paul State MN Zip Code 55146</p> <p>Purpose of Disbursement<br/>Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>     | <p><b>Transaction ID:</b> D247305<br/><b>Date of Disbursement</b><br/>12 / 18 / 2009</p> <p>Amount of Each Disbursement this Period<br/>153.00</p> <p><b>[MEMO ITEM]</b></p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Matt Roznowski</p> <p>Mailing Address 803 Douglas Ave Apt #4</p> <p>City Minneapolis State MN Zip Code 55403</p> <p>Purpose of Disbursement<br/>Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>               | <p><b>Transaction ID:</b> D247308<br/><b>Date of Disbursement</b><br/>12 / 18 / 2009</p> <p>Amount of Each Disbursement this Period<br/>800.99</p> <p><b>[MEMO ITEM]</b></p> |

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

0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 104 / 108

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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)  
Ellison for Congress

|    |  |   |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial)<br>David Wakely  | Transaction ID: D247309<br>Date of Disbursement<br>12 / 18 / 2009 |
|    | Mailing Address 1151 Hamline Ave N   | Amount of Each Disbursement this Period<br>1413.00                |
|    | City Saint Paul State MN Zip Code 55108-2613   |   |
|    | Purpose of Disbursement Payroll  | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                 |   |
|    | Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|    |  |   |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial)<br>Matt Roznowski  | Transaction ID: D247319<br>Date of Disbursement<br>11 / 06 / 2009 |
|    | Mailing Address 803 Douglas Ave Apt #4   | Amount of Each Disbursement this Period<br>46.90                  |
|    | City Minneapolis State MN Zip Code 55403   |   |
|    | Purpose of Disbursement Mileage/See Memo Entries   | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                 |   |
|    | Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|    |  |   |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial)<br>Office Max  | Transaction ID: D247340<br>Date of Disbursement<br>11 / 06 / 2009 |
|    | Mailing Address 1490 University Ave W  | Amount of Each Disbursement this Period<br>9.22                   |
|    | City Saint Paul State MN Zip Code 55104-3901   |   |
|    | Purpose of Disbursement Office Supplies  | [MEMO ITEM]   |
|    | Candidate Name   |   |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                 |   |
|    | Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   |

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 46.90 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |       |



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|   |  |
|---|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>David Wakely</p> <p>Mailing Address 1151 Hamline Ave N</p> <p>City Saint Paul State MN Zip Code 55108-2613</p> <p>Purpose of Disbursement Mileage/See Memo Entries</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> D247329</p> <p>Date of Disbursement<br/>11 / 10 / 2009</p> <p>Amount of Each Disbursement this Period<br/>300.86</p> <p>Category/Type</p>                    |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>Rainbow Foods</p> <p>Mailing Address 2919 26th Ave S</p> <p>City Minneapolis State MN Zip Code 55406</p> <p>Purpose of Disbursement Food for Volunteers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>            | <p><b>Transaction ID:</b> D247339</p> <p>Date of Disbursement<br/>11 / 10 / 2009</p> <p>Amount of Each Disbursement this Period<br/>17.27</p> <p>[MEMO ITEM]</p> <p>Category/Type</p>  |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Verizon Wireless</p> <p>Mailing Address PO Box 25505</p> <p>City Lehigh Valley State PA Zip Code 18002-5505</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010<br/><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>               | <p><b>Transaction ID:</b> D247338</p> <p>Date of Disbursement<br/>11 / 10 / 2009</p> <p>Amount of Each Disbursement this Period<br/>210.00</p> <p>[MEMO ITEM]</p> <p>Category/Type</p> |

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

300.86

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

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

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

FOR LINE NUMBER:  
(check only one)

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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)  
Ellison for Congress

|           |   |  |
|-----------|---|--|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>CitiBank<br><br>Mailing Address 399 Park Avenue<br><br>City New York State NY Zip Code 10043<br><br>Purpose of Disbursement<br>See Memo Entries<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  | Transaction ID: D247331<br>Date of Disbursement<br>11 / 12 / 2009<br><br>Amount of Each Disbursement this Period<br>218.29<br><br>Category/<br>Type  |
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>St. Louis Hotel<br><br>Mailing Address 730 Bienville St.<br><br>City New Orleans State LA Zip Code 70130<br><br>Purpose of Disbursement<br>Travel<br>Candidate Name<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  | Transaction ID: D247337<br>Date of Disbursement<br>11 / 12 / 2009<br><br>Amount of Each Disbursement this Period<br>218.29<br><br>[MEMO ITEM]        |
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Minnesota Democratic Farmer Labor Party<br><br>Mailing Address 255 E Plato Blvd<br><br>City Saint Paul State MN Zip Code 55102<br><br>Purpose of Disbursement<br>See Memo Entries<br>Candidate Name<br>Minnesota Democratic Farmer Labor Party<br><br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br><br>Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: D247922<br>Date of Disbursement<br>11 / 04 / 2009<br><br>Amount of Each Disbursement this Period<br>4538.96<br><br>Category/<br>Type |

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

4757.25

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

|                                     |     |                          |     |                          |     |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/> | 19b |
| <input type="checkbox"/>            | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input type="checkbox"/> | 21  |

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)  
Ellison for Congress

|    |  |  |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Health Partners   | Transaction ID: D247924<br>Date of Disbursement<br>MM / DD / YYYY<br>11 / 04 / 2009  |
|    | Mailing Address PO Box 1289  | Amount of Each Disbursement this Period<br>4538.96   |
|    | City Minneapolis State MN Zip Code 55440   |  |
|    | Purpose of Disbursement Health Insurance   | Category/Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|    | State: District:   |  |

[MEMO ITEM]

|    |  |  |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial)<br>David Wakely  | Transaction ID: D249598<br>Date of Disbursement<br>MM / DD / YYYY<br>12 / 16 / 2009  |
|    | Mailing Address 1151 Hamline Ave N   | Amount of Each Disbursement this Period<br>273.33  |
|    | City Saint Paul State MN Zip Code 55108-2613   |  |
|    | Purpose of Disbursement Mileage/See Memo Entries   | Category/Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|    | State: District:   |  |

|    |  |  |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial)<br>Verizon Wireless  | Transaction ID: D249606<br>Date of Disbursement<br>MM / DD / YYYY<br>12 / 16 / 2009  |
|    | Mailing Address PO Box 25505   | Amount of Each Disbursement this Period<br>105.00  |
|    | City Lehigh Valley State PA Zip Code 18002-5505  |  |
|    | Purpose of Disbursement Telephone  | Category/Type  |
|    | Candidate Name   |  |
|    | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|    | State: District:   |  |

[MEMO ITEM]

|  |   |           |
|--|---|-----------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | ▶ | 273.33    |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ | 122909.40 |

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

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

FOR LINE NUMBER: (check only one)

PAGE 108 / 108

|                          |     |                          |     |                          |     |                                     |     |
|--------------------------|-----|--------------------------|-----|--------------------------|-----|-------------------------------------|-----|
| <input type="checkbox"/> | 17  | <input type="checkbox"/> | 18  | <input type="checkbox"/> | 19a | <input type="checkbox"/>            | 19b |
| <input type="checkbox"/> | 20a | <input type="checkbox"/> | 20b | <input type="checkbox"/> | 20c | <input checked="" type="checkbox"/> | 21  |

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)  
Ellison for Congress

|    |  |  |                   |  |  |
|----|--|--|-------------------|--|--|
| A. | Full Name (Last, First, Middle Initial)<br>Friends of Tarryl Clark   |  |                   | Transaction ID: D249605                            |  |
|    | Mailing Address 316 East Hennepin Ave  |  |                   | Date of Disbursement<br>12 / 29 / 2009             |  |
|    | City<br>Minneapolis  | State<br>MN  | Zip Code<br>55414 | Amount of Each Disbursement this Period<br>1000.00 |  |
|    | Purpose of Disbursement<br>Contribution  |  |                   | Category/<br>Type                                  |  |
|    | Candidate Name<br>Tarryl Lynn Clark  |  |                   |  |  |
|    | Office Sought:<br><input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |  |  |
|    | State: MN  | District: 06   |                   |  |  |
| B. | Full Name (Last, First, Middle Initial)<br>Wellstone Action  |  |                   | Transaction ID: D245093                            |  |
|    | Mailing Address 2446 University Ave W<br>St 170  |  |                   | Date of Disbursement<br>10 / 27 / 2009             |  |
|    | City<br>Saint Paul   | State<br>MN  | Zip Code<br>55114 | Amount of Each Disbursement this Period<br>500.00  |  |
|    | Purpose of Disbursement<br>Contribution  |  |                   | Category/<br>Type                                  |  |
|    | Candidate Name   |  |                   |  |  |
|    | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President            | Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                   |  |  |
|    | State:   | District:  |                   |  |  |

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

1500.00

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

1500.00