

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Tim Walz for US Congress

ADDRESS (number and street)

P.O. Box 938

Check if different than previously reported. (ACC)

Mankato

MN

56002

2. FEC IDENTIFICATION NUMBER ▼

C C00409409

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MN

01

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

/ /

through

/ /

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 Gerald Maschka

Signature of Treasurer Gerald Maschka

[Electronically Filed]

Date

/ /

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Tim Walz for US Congress

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

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 121832.41 | 1544922.20 |
| (b) Total Contribution Refunds (from Line 20(d)) | 1200.00 | 4210.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 120632.41 | 1540712.20 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 323285.72 | 1488272.19 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 21082.61 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 323285.72 | 1467189.58 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 154307.51 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Tim Walz for US Congress

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

I. RECEIPTS

| COLUMN A Total this Period | COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2014"/> (date of general election) | COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2014"/> (date after general election) through <input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2014"/> (last day of reporting period) |
|---|---|---|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other than Political Committees | | |
| (i) Itemized (use Schedule A) | | |
| <input type="text" value="46111.00"/> | <input type="text" value="634013.52"/> | <input type="text" value="750.00"/> |
| (ii) Unitemized | | |
| <input type="text" value="13721.41"/> | <input type="text" value="233624.51"/> | <input type="text" value="435.00"/> |
| (iii) Total of contributions from individuals | | |
| <input type="text" value="59832.41"/> | <input type="text" value="867638.03"/> | <input type="text" value="1185.00"/> |
| (b) Political Party Committees | | |
| <input type="text" value="0.00"/> | <input type="text" value="7021.67"/> | <input type="text" value="0.00"/> |
| (c) Other Political Committees | | |
| <input type="text" value="62000.00"/> | <input type="text" value="670262.50"/> | <input type="text" value="0.00"/> |

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 102

| COLUMN A Total this Period | COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date) | COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates) |
|---|---|---|
| (d) The Candidate | | |
| 0.00 | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d)) | | |
| 121832.41 | 1544922.20 | 1185.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | |
| 0.00 | 37.65 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate | | |
| 0.00 | 0.00 | 0.00 |
| (b) All Other Loans | | |
| 0.00 | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b)) | | |
| 0.00 | 0.00 | 0.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.) | | |
| 0.00 | 21082.61 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | | |
| 0.00 | 1250.95 | 0.00 |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) | | |
| 121832.41 | 1567293.41 | 1185.00 |

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 102

Write or Type Committee Name

Tim Walz for US Congress

 Report Covering the Period: From: / / To: / /
II. DISBURSEMENTS

| COLUMN A Total this Period | COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date) | COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates) |
|---|---|---|
| 17. OPERATING EXPENDITURES | | |
| 323285.72 | 1488272.19 | 18441.89 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | | |
| 0.00 | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate | | |
| 0.00 | 0.00 | 0.00 |
| (b) Of All Other Loans | | |
| 0.00 | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b)) | | |
| 0.00 | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| 1200.00 | 3710.00 | 0.00 |
| (b) Political Party Committees | | |
| 0.00 | 0.00 | 0.00 |

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 102

| COLUMN A Total this Period | COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date) | COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates) |
|-------------------------------|---|---|
|-------------------------------|---|---|

(c) Other Political Committees (such as PACs)

| | | |
|------|--------|------|
| 0.00 | 500.00 | 0.00 |
|------|--------|------|

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

| | | |
|---------|---------|------|
| 1200.00 | 4210.00 | 0.00 |
|---------|---------|------|

21. OTHER DISBURSEMENTS

| | | |
|----------|----------|---------|
| 48500.00 | 63295.00 | 3500.00 |
|----------|----------|---------|

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

| | | |
|-----------|------------|----------|
| 372985.72 | 1555777.19 | 21941.89 |
|-----------|------------|----------|

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

| | | |
|-----------|------------|---------|
| 120632.41 | 1540712.20 | 1185.00 |
|-----------|------------|---------|

IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

| | | |
|-----------|------------|----------|
| 323285.72 | 1467189.58 | 18441.89 |
|-----------|------------|----------|

V. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 405460.82 |
| 24. TOTAL RECIEPTS THIS PERIOD (from Line 16)..... | 121832.41 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 527293.23 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 372985.72 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) | 154307.51 |

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Richard Anglim

Mailing Address 5015 35th Ave S
Apt 217

City Minneapolis State MN Zip Code 55417-1563

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : C7828470

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Roger Henry Appeldorn

Mailing Address 10055 Hadley Ave N

City White Bear Lake State MN Zip Code 55110-1202

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : C7812500

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Hilde Bacharach

Mailing Address 211 - 2nd Street NW, Apt 908

City Rochester State MN Zip Code 55901

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **345.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : C7815464

Amount of Each Receipt this Period
20.00

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

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

470.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Daniel Bastian

Mailing Address 70 Trail Dr

City Mankato State MN Zip Code 56001-2631

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

Name of Employer: Angie's Artisan Treats, Inc
Occupation: Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 5000.00

Date of Receipt: 10 / 16 / 2014

Transaction ID : C7798249

Amount of Each Receipt this Period: 2500.00

B. Full Name (Last, First, Middle Initial)
Eunice Bauman

Mailing Address 36749 - 820th Street

City Okabena State MN Zip Code 56161-3033

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

Name of Employer: N/A
Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 525.00

Date of Receipt: 10 / 28 / 2014

Transaction ID : C7821405

Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
Karla E Beck

Mailing Address 73780 - 270th Street

City Saint James State MN Zip Code 56081

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

Name of Employer: Saint James Public Schools
Occupation: Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 558.52

Date of Receipt: 10 / 20 / 2014

Transaction ID : C7803252

Amount of Each Receipt this Period: 100.00

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

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

2625.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Robert L Beck

Mailing Address 318 S Franklin Street

City State Zip Code
New Ulm MN 56073-3224

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
270.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : C7814721

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Alan M Behrends

Mailing Address 901 McGill Place

City State Zip Code
St. Peter MN 56082

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

Name of Employer Occupation
Gustavus Adolphus College Director of Fine Arts

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : C7799563

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Sandra Beito

Mailing Address 900 1st Ave S

City State Zip Code
Sleepy Eye MN 56085

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

Name of Employer Occupation
Mark Thomas Co. Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : C7814662

Amount of Each Receipt this Period
250.00

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

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

400.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Ford Watson Bell DVM

Mailing Address 3603 Thornapple St

City State Zip Code
Chevy Chase MD 20815-4113

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

Name of Employer Occupation
American Association of Museums Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : C7803274

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Sharon Bergling

Mailing Address 62941 State Hwy 30

City State Zip Code
Butterfield MN 56120

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

Name of Employer Occupation
Self-Employed Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : C7803272

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
William C. Bessler

Mailing Address 907 E Mulberry Street

City State Zip Code
Mankato MN 56001-4433

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : C7825682

Amount of Each Receipt this Period
300.00

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

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

900.00

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

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

FOR LINE NUMBER: PAGE 11 OF 102
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
David A Bieging
 Mailing Address 122 C Street Nw, Suite 240
 City State Zip Code
 Washington DC 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed Attorney
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 30 2014
Transaction ID : C7828476
 Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Lee A. Biersdorf
 Mailing Address 1825 Spring Valley Rd
 City State Zip Code
 Golden Valley MN 55422-4177
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 UnitedHealth Group Manager
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 26 2014
Transaction ID : C7817126
 Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
David A. Bjork
 Mailing Address 1900 Mount Curve Ave
 City State Zip Code
 Minneapolis MN 55403-1020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Integrated Healthcare Strategies Consultant
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 23 2014
Transaction ID : C7814718
 Amount of Each Receipt this Period
 250.00

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

1750.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Sharon L Borine

Mailing Address 18285 Croixwood Ln

City Eden Prairie State MN Zip Code 55347-1020

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **240.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : C7817217

Amount of Each Receipt this Period
50.00

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

Mailing Address 2508 Fallsmere Ct

City Falls Church State VA Zip Code 22043-3234

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

Name of Employer Law Office of John R. Brimsek, PC Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 25 / 2014

Transaction ID : C7816890

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Thomas Brinkman

Mailing Address 1623 Teton Ct NE

City Rochester State MN Zip Code 55906-4200

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **205.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : C7803478

Amount of Each Receipt this Period
15.00

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

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

565.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Stephen J Bubul

Mailing Address 4100 Edmund Blvd

City Minneapolis State MN Zip Code 55406

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

Name of Employer Kennedy & Graven Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : C7832393

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Charles G Calhoun

Mailing Address 7106 Quail Circle W

City Brooklyn Center State MN Zip Code 55429

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : C7812196

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
William W Cameron

Mailing Address 1920 Drew Ave S

City St Louis Park State MN Zip Code 55416-3618

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

Name of Employer Hanson and Efron Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2014

Transaction ID : C7832422

Amount of Each Receipt this Period
100.00

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

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

400.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

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

Mailing Address 145 Holly Lane N

City Plymouth State MN Zip Code 55447

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : C7828468

Amount of Each Receipt this Period
 200.00

Amount of Each Receipt this Period
 450.00

B. Full Name (Last, First, Middle Initial)
Terrance Carlson

Mailing Address 510 Groveland Ave # 422

City Minneapolis State MN Zip Code 55403-3220

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

Name of Employer Self-Employed Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : C7814969

Amount of Each Receipt this Period
 500.00

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Harlan M Cavert

Mailing Address 100 2nd Street SE Apt 1002

City Minneapolis State MN Zip Code 55414-2129

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

Name of Employer University of Minnesota Occupation Development Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : C7820712

Amount of Each Receipt this Period
 150.00

Amount of Each Receipt this Period
 550.00

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

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

850.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
George Chronic

Mailing Address **27 Otter Ct**

City **North Mankato** State **MN** Zip Code **56003-4244**

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

Name of Employer **Maschka, Riedy & Ries** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **425.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : C7825696

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Augustus W. Clapp III

Mailing Address **757 Osceola Ave # 1**

City **Saint Paul** State **MN** Zip Code **55105-3327**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **950.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : C7822332

Amount of Each Receipt this Period
200.00

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

Mailing Address **16535 Birch Briar Trail**

City **Plymouth** State **MN** Zip Code **55447**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : C7812185

Amount of Each Receipt this Period
100.00

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

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

500.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Shirley Anne Conn

Mailing Address 4636 Cedar Lake Rd S, Apt 3

City Minneapolis State MN Zip Code 55416

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : C7803276

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Shirley Anne Conn

Mailing Address 4636 Cedar Lake Rd S, Apt 3

City Minneapolis State MN Zip Code 55416

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : C7821401

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Russell Cowles

Mailing Address 2413 Humboldt Ave So

City Minneapolis State MN Zip Code 55405-2540

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : C7814803

Amount of Each Receipt this Period
1000.00

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

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

1300.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Fran J. Davis

Mailing Address 1512 Douglas Ave

City Minneapolis State MN Zip Code 55403-2805

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

Name of Employer Coldwell Banker Burnet Occupation Sales Manager/Realty

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : C7832418

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Gregory Davis

Mailing Address 46287 Wildlife Road

City Cleveland State MN Zip Code 56017

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

Name of Employer Cleveland Public School Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : C7821391

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Mary Dooley

Mailing Address 301 S 5th St Apt 321

City Mankato State MN Zip Code 56001-4586

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : C7828466

Amount of Each Receipt this Period
500.00

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

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

1025.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
Tim Walz for US Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) Richard L Duroe | | Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 17 / 2014 |
| Mailing Address PO Box 128 | | Transaction ID : C7799565 |
| City Jeffers | State MN | Zip Code 56145 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 250.00 | |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 800.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) George M. Ehrhardt Jr. | | Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2014 |
| Mailing Address 73485 224th St. | | Transaction ID : C7806872 |
| City Albert Lea | State MN | Zip Code 56007 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500.00 | |
| Name of Employer Albert Lea Seed | Occupation Owner/Manager | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) Cole Fauver | | Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 28 / 2014 |
| Mailing Address 2010 West 2st St. | | Transaction ID : C7821372 |
| City Minneapolis | State MN | Zip Code 55405-2414 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25.00 | |
| Name of Employer Self Employed | Occupation Lawyer | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1625.00 | |

| | |
|---|--------|
| 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: (check only one) | PAGE 19 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Richard G Fish

Mailing Address 5345 37th Ave S

City Minneapolis State MN Zip Code 55417-2129

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

Name of Employer Minneapolis Public Schools Occupation IT Field Tech

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **245.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : C7825551

Amount of Each Receipt this Period
15.00

B. Full Name (Last, First, Middle Initial)
Richard G Fish

Mailing Address 5345 37th Ave S

City Minneapolis State MN Zip Code 55417-2129

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

Name of Employer Minneapolis Public Schools Occupation IT Field Tech

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **245.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 02 / 2014

Transaction ID : C7832194

Amount of Each Receipt this Period
15.00

C. Full Name (Last, First, Middle Initial)
Beverly FitzGerald

Mailing Address 174 Bank Street

City Minneapolis State MN Zip Code 55414

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **475.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : C7814724

Amount of Each Receipt this Period
100.00

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

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

130.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
James D Fleming

Mailing Address 1656 Castle Drive

City N Mankato State MN Zip Code 56003

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

Name of Employer Maschka, Riedy & Ries Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : C7825689

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Richard Flynn

Mailing Address 1235 Yale Place
Apt 1409

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: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : C7832395

Amount of Each Receipt this Period
250.00

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

Mailing Address 204 - 11th Ave NE

City Waseca State MN Zip Code 56093

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : C7814701

Amount of Each Receipt this Period
40.00

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

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

540.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 21 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Donald Fowler

Mailing Address 2725 Devine St
Ste 1

City Columbia State SC Zip Code 29205-2438

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

Name of Employer: Fowler Communications INC Occupation: Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 950.00

Date of Receipt: 10 / 30 / 2014

Transaction ID : C7828469

Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
Charles T Frenz

Mailing Address 152 Shadywood Ave

City Mankato State MN Zip Code 56001-2626

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

Name of Employer: River Bend Construction Occupation: CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 10 / 16 / 2014

Transaction ID : C7798231

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Nick A. Frenz

Mailing Address 26 Sandi Ct

City North Mankato State MN Zip Code 56003-1537

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

Name of Employer: Self-Employed Occupation: Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 850.00

Date of Receipt: 10 / 17 / 2014

Transaction ID : C7800528

Amount of Each Receipt this Period: 250.00

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

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

700.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 22 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Pamela Goehring

Mailing Address PO Box 98
211 NW 1 St

City State Zip Code
New Richland MN 56072

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : C7832531

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Bruce A Gray

Mailing Address 1208 Rockbend Pkwy

City State Zip Code
Saint Peter MN 56082-1334

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : C7821395

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Marcia Greenfield

Mailing Address 2308 - 32nd Avenue S

City State Zip Code
Minneapolis MN 55406

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : C7812192

Amount of Each Receipt this Period
150.00

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

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

400.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 23 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Donnella Griffin

Mailing Address 17528 Four Corners Dr

City Spring Grove State MN Zip Code 55974

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : C7820156

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Steve Grove

Mailing Address 211 Lexington Dr

City Menlo Park State CA Zip Code 94025-2909

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

Name of Employer Google Occupation Technology

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2014

Transaction ID : C7830040

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mary Jo Haeg

Mailing Address 304 Rolling Meadows Lane SE

City New Prague State MN Zip Code 56071

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

Name of Employer Self-Employed Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : C7831270

Amount of Each Receipt this Period
50.00

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

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

250.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 24 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Anne A. Hage | | Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2014 |
| Mailing Address 3701 Bryant Ave S Apt 410 | | Transaction ID : C7803264 |
| City Minneapolis | State MN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 450.00 | |

| | | |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Kenneth Hamilton | | Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014 |
| Mailing Address 1212 - 3rd Street NE Apt 102 | | Transaction ID : C7821402 |
| City Waseca | State MN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1800.00 | |

| | | |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ruth M Harvey | | Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014 |
| Mailing Address 38393 Timber Ln | | Transaction ID : C7821396 |
| City Saint Peter | State MN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Chesley, Kroon, Harvey et al | Occupation Lawyer | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1460.00 | |

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 650.00 |
| 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: (check only one) | PAGE 25 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Thane Hawkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 126 Dellwood Ave
 City State Zip Code
 Dellwood MN 55110-1502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Polar Chevrolet Owner
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 25 2014
Transaction ID : C7816835
 Amount of Each Receipt this Period
 1000.00

B. Peter Heegaard
 Full Name (Last, First, Middle Initial)
 Mailing Address 184 Bank Street SE
 City State Zip Code
 Minneapolis MN 55414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 N/A Retired
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 29 2014
Transaction ID : C7825934
 Amount of Each Receipt this Period
 250.00

C. Shirley Higginbotham
 Full Name (Last, First, Middle Initial)
 Mailing Address 152 Oxford Path
 City State Zip Code
 Mankato MN 56001-6220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 N/A Retired
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 20 2014
Transaction ID : C7803278
 Amount of Each Receipt this Period
 50.00

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

1300.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 26 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) Darrell C Hinsman | | Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 23 / 2014 |
| Mailing Address 69 Roslyn Road | | Transaction ID : C7814652 |
| City New Ulm | State MN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 400.00 | |

| | | |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) Alan D Hoffman MD | | Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2014 |
| Mailing Address 2223 Viking Drive NW | | Transaction ID : C7832390 |
| City Rochester | State MN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 350.00 |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1750.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) Diane Hofstede | | Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 04 / 2014 |
| Mailing Address 610 Ramsey St NE | | Transaction ID : C7844808 |
| City Minneapolis | State MN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Self-Employed | Occupation Activist | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 600.00 | |

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 950.00 |
| 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: (check only one) | PAGE 27 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Scott Humpal

Mailing Address 4841 S Oso Pkwy

City State Zip Code
Corpus Christi TX 78413-6016

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

Name of Employer Occupation
Humpal Physical Therapy Physical Therapist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : C7820849

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Hubert H Humphrey IV

Mailing Address 3770 Rosewood Ln N

City State Zip Code
Plymouth MN 55441

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

Name of Employer Occupation
Self-Employed Director Public Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : C7832385

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Colleen Jackson

Mailing Address 111 Mapleridge Drive

City State Zip Code
Mankato MN 56001

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 16 / 2014

Transaction ID : C7798245

Amount of Each Receipt this Period
25.00

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

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

1625.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 28 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Valorie L. Jackson

Mailing Address 549 Hawthorne Woods Dr

City State Zip Code
Eagan MN 55123-3060

FEC ID number of contributing federal political committee.

Name of Employer Occupation
N/A Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : C7813369

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
Robert A Johnson-Hill

Mailing Address 450 Emerald Ln

City State Zip Code
Mahtomedi MN 55115-1485

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Robert Hill Law Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : C7803309

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
Claudia S. S. Kaul

Mailing Address 15621 42nd Street South

City State Zip Code
Afton MN 55001

FEC ID number of contributing federal political committee.

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : C7828453

Amount of Each Receipt this Period

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

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 OF 102
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Joan C Keetley
 Mailing Address 925 Bahl's Drive #106
 City State Zip Code
 Hastings MN 55033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 N/A Retired
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 3400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 26 / 2014
Transaction ID : C7820828
 Amount of Each Receipt this Period
 600.00

B. Full Name (Last, First, Middle Initial)
Garrison Keillor
 Mailing Address 294 Summit Ave
 City State Zip Code
 Saint Paul MN 55102-2121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed Writer
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 4100.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014
Transaction ID : C7822325
 Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
Garry C Kief
 Mailing Address 8295 S La Cienega Blvd
 City State Zip Code
 Inglewood CA 90301-1521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 STILETTO Entertainment CEO
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 25 / 2014
Transaction ID : C7816943
 Amount of Each Receipt this Period
 1000.00

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

3100.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 30 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Garry Kieves

Mailing Address 5020 Woodhurst Ln

City State Zip Code
Minnetonka MN 55345-4644

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : C7831282

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Lynne Eaton Kirklin

Mailing Address 1865 Tiffany Cove Lane SW

City State Zip Code
Rochester MN 55902

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : C7821366

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Joan K Klagge

Mailing Address 104 Candlewood Dr

City State Zip Code
Winona MN 55987-2502

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : C7799567

Amount of Each Receipt this Period
50.00

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

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

2700.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 31 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. Pamela Klossner | | Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2014 | |
| Mailing Address 11 Indian Point Drive | | Transaction ID : C7825932 | |
| City New Ulm | State MN | Zip Code 56073 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 | |
| Name of Employer City of New Ulm | Occupation Police Clerk | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 400.00 | | |

| | | | |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. John W Kluge | | Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2014 | |
| Mailing Address 1833 Crestview Drive | | Transaction ID : C7814665 | |
| City New Ulm | State MN | Zip Code 56073-3726 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 300.00 | |
| Name of Employer N/A | Occupation Retired | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1700.00 | | |

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. Don H Kratsch | | Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2014 | |
| Mailing Address 1388 Summit Circle | | Transaction ID : C7813365 | |
| City West Saint Paul | State MN | Zip Code 55118 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 | |
| Name of Employer N/A | Occupation Retired | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 440.00 | | |

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 425.00 |
| 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: (check only one) | PAGE 32 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Joan Krikava

Mailing Address 308 South Broadway

City State Zip Code
New Ulm MN 56073

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

Name of Employer Occupation
Physicians Group of New Ulm Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : C7814659

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Susan W. Lenfestey

Mailing Address 1833 Girard Ave S

City State Zip Code
Minneapolis MN 55403-2944

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

Name of Employer Occupation
N/A None

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : C7807143

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Stephen E Lieberman

Mailing Address 9549 Penn Ave S

City State Zip Code
Bloomington MN 55431-2563

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

Name of Employer Occupation
Lieberman Companies Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : C7807140

Amount of Each Receipt this Period
500.00

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

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

800.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 33 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Anne G. Makepeace

Mailing Address 626 Austin Dr

City Saint Peter State MN Zip Code 56082-1104

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

Name of Employer United Way Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : C7821379

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Gerald L Maschka

Mailing Address 417 Diamond Creek Road

City Mankato State MN Zip Code 56001

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : C7825685

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Charles L Mitchell

Mailing Address 510 Jefferson St N

City New Ulm State MN Zip Code 56073

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2014

Transaction ID : C7814669

Amount of Each Receipt this Period
100.00

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

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

450.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 34 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) Kay L Moline | | Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014 |
| Mailing Address 1306 N Washington Ave | | Transaction ID : C7821381 |
| City Saint Peter | State MN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer Gustavus Adolphus College | Occupation Professor | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) Ellen Morrow | | Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2014 |
| Mailing Address 216 Hubbell Ave | | Transaction ID : C7825671 |
| City Mankato | State MN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 10.00 |
| Name of Employer Lutheran Social Service of Minnesota | Occupation Social Worker | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 215.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) Sharon Mueller | | Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2014 |
| Mailing Address 1317 North Lynnbrook Drive | | Transaction ID : C7837580 |
| City Arlington | State VA | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer NCIV | Occupation President | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 700.00 | |

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 310.00 |
| 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: (check only one) | PAGE 35 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Sara H Mushlitz

Mailing Address 45 University Ave SE

City Minneapolis State MN Zip Code 55414-1000

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

Name of Employer Wells Fargo Advisors Occupation Financial Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : C7815708

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Kay Myhrman-Toso

Mailing Address 3442 Oxford Circle

City Woodbury State MN Zip Code 55125

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 21 / 2014

Transaction ID : C7848753

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Marcia A Nagel

Mailing Address 105 Royal Road

City Mankato State MN Zip Code 56001

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : C7825694

Amount of Each Receipt this Period
100.00

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 36 OF 102
(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)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Margaret B Nelson

Mailing Address 4001 - 19th Ave NW
Apt 909

City State Zip Code
Rochester MN 55901-0591

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : C7814713

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Donald Nord

Mailing Address 36566 180th Ave

City State Zip Code
Goodhue MN 55027-4900

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

Name of Employer Occupation
Self-Employed Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2014

Transaction ID : C7832415

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Nancy Jo Nord

Mailing Address 36566 - 180th Ave

City State Zip Code
Goodhue MN 55027

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

Name of Employer Occupation
Self-Employed Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
625.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : C7807373

Amount of Each Receipt this Period
100.00

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

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

300.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 37 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Lowell J. Noteboom

Mailing Address 11704 Live Oak Dr

City State Zip Code
Minnetonka MN 55305-2592

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

Name of Employer Occupation
Stinson Leonard Street Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : C7815027

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Kathleen A O'Brien

Mailing Address 4848 Northrop Drive

City State Zip Code
Minneapolis MN 55406-3660

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

Name of Employer Occupation
University of Minnesota Vice President of University Services

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2014

Transaction ID : C7832527

Amount of Each Receipt this Period
100.00

C. 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
Tribal Community Tribal Community

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : C7828473

Amount of Each Receipt this Period
2600.00

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

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

3200.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 38 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) Barbara Osborne | | Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2014 |
| Mailing Address 82924 Highway 60 | | Transaction ID : C7803249 |
| City Madelia | State MN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 900.00 | |

| | | |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) Floyd D. Palmer | | Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2014 |
| Mailing Address 213 Woodhill Court | | Transaction ID : C7803253 |
| City Mankato | State MN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Palmer Bus Services | Occupation Owner | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 5000.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) Lyelle L Palmer | | Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2014 |
| Mailing Address 504 Lake Street | | Transaction ID : C7803275 |
| City Winona | State MN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 150.00 |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 750.00 | |

| | |
|---|---------|
| 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: (check only one) | PAGE 39 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Mary Carla Pardue

Mailing Address 2901 Knox Ave S
Apt 1

City Minneapolis State MN Zip Code 55408-1867

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

Name of Employer Self-Employed Occupation Event Planner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2014

Transaction ID : C7832421

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Carol Pass

Mailing Address 2536 18th Ave S

City Minneapolis State MN Zip Code 55404-4010

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : C7803300

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Geraldine Pehrson

Mailing Address 41214 - 436th Street

City St Peter State MN Zip Code 56082

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : C7821388

Amount of Each Receipt this Period
100.00

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

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

450.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 40 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Alva F. Pingel III

Mailing Address 13894 Birchwood Ave

City Rosemount State MN Zip Code 55068-3583

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **320.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : C7806017

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Rebecca Pohlad

Mailing Address 4801 Bywood St W

City Edina State MN Zip Code 55436-1306

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3100.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : C7821432

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Janet Prehn

Mailing Address 6309 Killarney Ct

City Madison Lake State MN Zip Code 56063-9518

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 04 / 2014

Transaction ID : C7837569

Amount of Each Receipt this Period
100.00

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 650.00 |
| 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: (check only one) | PAGE 41 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Phillip James Qualy

Mailing Address 3021 Emerson Avenue South

City State Zip Code
Minneapolis MN 55408

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

Name of Employer Occupation
United Transportation Union Legislative Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
211.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 31 2014

Transaction ID : C7832388

Amount of Each Receipt this Period
111.00

B. Full Name (Last, First, Middle Initial)
Gyles W Randall

Mailing Address 123 8th Street SE

City State Zip Code
Waseca MN 56093

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 28 2014

Transaction ID : C7821407

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Maura Therese Randall

Mailing Address 2233 W Dream Dr

City State Zip Code
North Mankato MN 56003-2305

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

Name of Employer Occupation
N/A Retired/Disabled

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3700.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 22 2014

Transaction ID : C7809675

Amount of Each Receipt this Period
500.00

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

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

711.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 42 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Paul H. Ravich | | Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2014 |
| Mailing Address 504 River St | | Transaction ID : C7806883 |
| City Minneapolis | State MN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Ravich Meyer Law Firm | Occupation Attorney | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1500.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Michael K Riley | | Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2014 |
| Mailing Address 37989 Valley View Rd | | Transaction ID : C7837578 |
| City St Peter | State MN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Riley Tanis | Occupation Attorney | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. William Robbins | | Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2014 |
| Mailing Address 2277 Stillwater Ave E | | Transaction ID : C7825943 |
| City Maplewood | State MN | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 600.00 |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 600.00 | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1350.00 |
| 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: (check only one) | PAGE 43 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Stephen M. Ryan

Mailing Address 44 Wellesley Circle

City State Zip Code
Glen Echo MD 20812

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

Name of Employer Occupation
McDermott Will & Emery Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : C7825458

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Katherine Sallstrom

Mailing Address 20177 State Highway 66

City State Zip Code
Mankato MN 56001

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

Name of Employer Occupation
ISD 77, Mankato Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : C7803258

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Sandra Sandell

Mailing Address 3151 Dean Ct

City State Zip Code
Minneapolis MN 55416-4387

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : C7806467

Amount of Each Receipt this Period
100.00

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

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

1200.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 44 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Stephen B. Scallen

Mailing Address 3574 Northome Rd

City State Zip Code
Wayzata MN 55391

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : C7840314

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
John A Scheid

Mailing Address 2502 - 14th Ave NW

City State Zip Code
Rochester MN 55901-7732

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : C7814728

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
James Schenz

Mailing Address 13960 47th St N

City State Zip Code
Stillwater MN 55082-1234

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : C7803645

Amount of Each Receipt this Period
250.00

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

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

1350.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 45 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. Doug Schmidt | | Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2014 | |
| Mailing Address 220 2nd St | | Transaction ID : C7828427 | |
| City Excelsior | State MN | Zip Code 55331-1804 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 150.00 | |
| Name of Employer Schmidt Law Firm | Occupation Attorney | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 300.00 | | |

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. Doug Schmidt | | Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2014 | |
| Mailing Address 220 2nd St | | Transaction ID : C7828435 | |
| City Excelsior | State MN | Zip Code 55331-1804 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 150.00 | |
| Name of Employer Schmidt Law Firm | Occupation Attorney | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 300.00 | | |

| | | | |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. Lori A Sellner | | Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2014 | |
| Mailing Address 420 - 3rd Ave NE | | Transaction ID : C7814645 | |
| City Sleepy Eye | State MN | Zip Code 56085 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 | |
| Name of Employer BIC Graphics | Occupation Job Planner | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 2150.00 | | |

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 500.00 |
| TOTAL This Period (last page this line number only)..... | [Empty Box] |

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 46 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Judith Silk Sherman

Mailing Address 3671 Oakton Ridge

City State Zip Code
Minnetonka MN 55305

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : C7815476

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Peter Shortridge

Mailing Address 2450 Garvin Heights Road

City State Zip Code
Winona MN 55987

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

Name of Employer Occupation
Global River Inc. Managing Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : C7821368

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
John Siekmeier

Mailing Address 1150 Lawn Ave

City State Zip Code
Grant MN 55115

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

Name of Employer Occupation
Minnesota DOT Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : C7832391

Amount of Each Receipt this Period
250.00

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

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

400.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 47 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Bardwell L. Smith

Mailing Address 301 - 7th Street W
Unit 2201

City Northfield State MN Zip Code 55057-2485

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : C7803262

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Keith Stelter

Mailing Address 355 N Welco Dr

City Saint Peter State MN Zip Code 56082-5996

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

Name of Employer University of Minnesota Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : C7821394

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
George Stoops

Mailing Address 133 Coy Street

City Mankato State MN Zip Code 56001-4609

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : C7799558

Amount of Each Receipt this Period
100.00

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

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

250.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 48 OF 102

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
David W Sturges

Mailing Address 15 S Franklin Street

City State Zip Code
 New Ulm MN 56073-3217

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

Name of Employer Occupation
 Gislason and Hunter LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 550.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : C7814647

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Steven R Sunde

Mailing Address 123 - 10th Avenue S

City State Zip Code
 St. James MN 56081

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

Name of Employer Occupation
 Sunde, Olson, Kircher and Zender Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : C7812506

Amount of Each Receipt this Period
 50.00

C. Full Name (Last, First, Middle Initial)
Steven R Sunde

Mailing Address 123 - 10th Avenue S

City State Zip Code
 St. James MN 56081

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

Name of Employer Occupation
 Sunde, Olson, Kircher and Zender Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : C7825686

Amount of Each Receipt this Period
 100.00

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

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

400.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 49 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Audrey E Swanson

Mailing Address 32770 State Hwy 4

City St James State MN Zip Code 56081

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : C7814682

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Glenn Tabor

Mailing Address 887 Southern Pine Lane SW

City Rochester State MN Zip Code 55902

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

Name of Employer Blachly, Tabor, Bozik & Hartmann, LLC Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2250.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : C7803270

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Paul H Tanis Jr

Mailing Address 922 S 4th St

City Saint Peter State MN Zip Code 56082-1423

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

Name of Employer Riley-Tanis, LLC Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : C7821374

Amount of Each Receipt this Period
250.00

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

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

850.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 50 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

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

Mailing Address 1010 Oak Terrace Dr

City North Mankato State MN Zip Code 56003-3423

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

Name of Employer Blethen, Gage & Krause, PLLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : C7825695

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ruth B Usem

Mailing Address 400 Groveland Ave
Apt 712

City Minneapolis State MN Zip Code 55403-3245

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

Name of Employer New Sidelines, Inc. Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 05 / 2014

Transaction ID : C7840312

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Charles Robert Utermohlen

Mailing Address 219 Dillon Avenue

City Mankato State MN Zip Code 56001

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : C7803271

Amount of Each Receipt this Period
50.00

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

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

550.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 51 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Maxine H Wallin

Mailing Address 7022 Tupa Circle

City Edina State MN Zip Code 55439

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : C7820713

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Dorothy Waltz

Mailing Address 1666 Coffman St

City Falcon Heights State MN Zip Code 55108-1330

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **240.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : C7821373

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Mary Ann Barrows Wark

Mailing Address 1588 Northrop St.

City Falcon Heights State MN Zip Code 55108-1322

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 25 / 2014

Transaction ID : C7816852

Amount of Each Receipt this Period
700.00

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

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

825.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 52 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Darrell D. Weaver

Mailing Address 725 4th Ave NW

City Plainview State MN Zip Code 55964-1046

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

Name of Employer ABA Water Systems, Inc. Occupation Owner/Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **245.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : C7828363

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Alice K Weed

Mailing Address 1519 Pleasant View Drive

City North Mankato State MN Zip Code 56003

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 29 / 2014

Transaction ID : C7825692

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Zygmunt Wilf

Mailing Address 500 Ashwood Rd

City Springfield State NJ Zip Code 07081-2527

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

Name of Employer Minnesota Vikings Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 03 / 2014

Transaction ID : C7832384

Amount of Each Receipt this Period
2500.00

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

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

2710.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 53 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
Aileen L Williams

Mailing Address 211 - 2nd Street NW, #1302

City Rochester State MN Zip Code 55901

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : C7814725

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Sue Wiltgen

Mailing Address 316 Quail Path

City Mankato State MN Zip Code 56001-7209

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2014

Transaction ID : C7832486

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Medora Woods

Mailing Address 4311 Cedar Lake Rd S

City Saint Louis Park State MN Zip Code 55416-3760

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 25 / 2014

Transaction ID : C7816988

Amount of Each Receipt this Period
250.00

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

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

375.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 54 OF 102 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | | |
|---|--------------------------------|--|--|
| Full Name (Last, First, Middle Initial) Linda Judd | | Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 16 / 2014 | |
| Mailing Address 156 Sylvan Rd. | | Transaction ID : C7803619A | |
| City Walnut Creek | State CA | Amount of Each Receipt this Period 1200.00 | |
| Zip Code 94596 | | * Earmarked Contribution: See Below | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer N/A | Occupation Not Employed | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 0.00 | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) ACT BLUE | | Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 19 / 2014 | |
| Mailing Address P.O. Box 382110 | | Transaction ID : C7803619AB | |
| City Cambridge | State MA | Amount of Each Receipt this Period 1200.00 | |
| Zip Code 02238 | | [MEMO ITEM] Note: Above Contribution earmarked through this organization. | |
| FEC ID number of contributing federal political committee. C C00401224 | | | |
| Name of Employer | Occupation Conduit total listed in Agg. field | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1353.41 | | |

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

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 1200.00 |
| TOTAL This Period (last page this line number only)..... | 46111.00 |

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

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

FOR LINE NUMBER: PAGE 55 OF 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
ACADEMY OF NUTRITION AND DIETETICS POLITICAL ACTION COMMITTEE

Mailing Address 1120 CONNECTICUT AVE. NW
SUITE 480

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C C00143560**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : C7807380

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ALLIANT ENERGY CORPORATION EMPLOYEE'S POLITICAL AC

Mailing Address 801 Pennsylvania Ave, NW
Suite 640

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C C00132092**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : C7816862

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF SLEEP MEDICINE POLITICAL ACTION COMMITTEE

Mailing Address ONE WESTBROOK CORPORATE CENTER
SUITE 920

City State Zip Code
WESTCHESTER IL 60154

FEC ID number of contributing federal political committee. **C C00331462**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : C7828474

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 56 OF 102 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PA)

Mailing Address 1015 15th St. NW
Suite 802

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2014

Transaction ID : C7832539

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
American Medical Association PAC

Mailing Address 25 Massachusetts Ave NW
Suite 600

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : C7799568

Amount of Each Receipt this Period
3000.00

C. Full Name (Last, First, Middle Initial)
BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 1310 G STREET NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00194746

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2014

Transaction ID : C7837582

Amount of Each Receipt this Period
1000.00

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 57 OF 102
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
BUFFALO WILD WINGS INC POLITICAL ACTION COMMITTEE (BWWPAC)

Mailing Address **5500 WAYZATA BLVD
SUITE 1600**

City State Zip Code
MINNEAPOLIS MN 55416

FEC ID number of contributing federal political committee. **C C00492157**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 17 2014

Transaction ID : **C7799569**

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
CASTRO FOR CONGRESS

Mailing Address **PO BOX 544**

City State Zip Code
SAN ANTONIO TX 78292

FEC ID number of contributing federal political committee. **C C00497933**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 20 2014

Transaction ID : **C7803283**

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
CELANESE CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address **222 WEST LAS COLINAS BLVD.
SUITE 900N**

City State Zip Code
DALLAS TX 75039

FEC ID number of contributing federal political committee. **C C00084871**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 30 2014

Transaction ID : **C7828475**

Amount of Each Receipt this Period
2000.00

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

4000.00

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 OF 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
DAIRY FARMERS OF AMERICA INC DEPAC (DAIRY EDUCATION POLITICA

Mailing Address **PO Box 909700**

City **Kansas City** State **MO** Zip Code **64190-9700**

FEC ID number of contributing federal political committee. **C C00001388**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
M M / D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : C7820173

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

Mailing Address **8400 WESTPARK DRIVE**

City **MCLEAN** State **VA** Zip Code **22102**

FEC ID number of contributing federal political committee. **C C00040998**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **6500.00**

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : C7832400

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
DELTA AIR LINES POLITICAL ACTION COMMITTEE

Mailing Address **1212 New York Avenue NW
Suite 200**

City **Washington** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00104802**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : C7807377

Amount of Each Receipt this Period
1000.00

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

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

6000.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 59 OF 102 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
Tim Walz for US Congress

A. DRIVE PAC FOR INT'L BROTHERHOOD

Full Name (Last, First, Middle Initial)
Mailing Address 25 Louisiana Avenue NW

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20001 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00032979

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : C7803287

Amount of Each Receipt this Period
3000.00

B. GMA PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1350 I Street NW, Suite 300

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20005 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00250068

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : C7825931

Amount of Each Receipt this Period
1000.00

C. GROWTH ENERGY PAC

Full Name (Last, First, Middle Initial)
Mailing Address 777 N CAPITOL STREET NE SUITE 805

| | | |
|--------------------|-------------|-------------------|
| City WASHINGTON | State DC | Zip Code 20002 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00475665

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : C7816860

Amount of Each Receipt this Period
1000.00

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

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

5000.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 60 OF 102 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
GROWTH ENERGY PAC

Mailing Address **777 N CAPITOL STREET NE SUITE 805**

City **WASHINGTON** State **DC** Zip Code **20002**

FEC ID number of contributing federal political committee. **C C00475665**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : C7820709

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL

Mailing Address **1615 L Street NW Suite 900**

City **Washington** State **DC** Zip Code **20036**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : C7828477

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
KRAFT FOODS GLOBAL INC. POLITICAL ACTION COMMITTEE

Mailing Address **975 F Street NW Ste. 1000**

City **Washington** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00077701**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : C7820708

Amount of Each Receipt this Period
1000.00

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

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

3500.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 61 OF 102 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
LABORERS' POLITICAL LEAGUE-LABORERS' INTERNATIONAL

Mailing Address 905 16th St NW
Second Floor

City Washington State DC Zip Code 20006-1703

FEC ID number of contributing federal political committee. **C C00007922**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 16 / 2014

Transaction ID : C7798250

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
League Of Conservation Voters

Mailing Address 1920 L Street NW Suite 800

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00252940**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : C7828472

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

Mailing Address ONE POST STREET
32ND FLOOR

City SAN FRANCISCO State CA Zip Code 94101

FEC ID number of contributing federal political committee. **C C00108035**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : C7807379

Amount of Each Receipt this Period
2500.00

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

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

10000.00

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

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

FOR LINE NUMBER: PAGE 62 OF 102
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
MOTORCYCLE RIGHTS FUND-POLITICAL ACTIVE CYCLISTS

Mailing Address 236 Massachusetts Ave. NE
Suite 510

City State Zip Code
WASHINGTON DC 20002

FEC ID number of contributing federal political committee. **C C00298356**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : C7831275

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF CONVENIENCE STORES POLITICAL ACTION COMMITTEE

Mailing Address 1600 DUKE STREET

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C C00126763**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : C7828471

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POL

Mailing Address 2901 Telestar Court

City State Zip Code
Falls Church VA 22042

FEC ID number of contributing federal political committee. **C C00005249**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : C7821383

Amount of Each Receipt this Period
1000.00

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

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

6500.00

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

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

FOR LINE NUMBER: PAGE 63 OF 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POL

Mailing Address 2901 Telestar Court

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : C7825690

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF WHEAT GROWERS POLITICAL AC

Mailing Address 415 2nd Street NE Suite 300

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00139964

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : C7846221

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 King St Ste 600

City Alexandria State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : C7821410

Amount of Each Receipt this Period
2500.00

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

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

5000.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 64 OF 102 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL RURAL LETTER CARRIERS' ASSOCIATION POLITI

Mailing Address 1630 Duke Street
4th Floor

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00072025

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2014

Transaction ID : C7814742

Amount of Each Receipt this Period
2000.00

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

Mailing Address 51 MADISON AVENUE
ROOM 1109

City NEW YORK State NY Zip Code 10010

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : C7815479

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
SHORT ELLIOTT HENDRICKSON INC EMPLOYEES FEDERAL PAC

Mailing Address 3535 VADNAIS CENTER DRIVE

City VADNAIS HEIGHTS State MN Zip Code 55110

FEC ID number of contributing federal political committee. **C** C00384206

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : C7832382

Amount of Each Receipt this Period
500.00

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

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

3500.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 65 OF 102 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERI

Mailing Address 3930 PENDER DRIVE
SUITE 340

City State Zip Code
FAIRFAX VA 20121

FEC ID number of contributing federal political committee. **C** C00120030

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : C7803284

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

Mailing Address P O BOX 500

City State Zip Code
Renville MN 56284

FEC ID number of contributing federal political committee. **C** C00166348

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : C7820177

Amount of Each Receipt this Period
3000.00

C. Full Name (Last, First, Middle Initial)
THE AMERICAN OCCUPATIONAL THERAPY ASSOCIATION, INC. POLITICAL ACTION COMMITTEE (AOTPAC)

Mailing Address 4720 MONTGOMERY LANE, SUITE 200

City State Zip Code
BETHESDA MD 20814

FEC ID number of contributing federal political committee. **C** C00089086

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : C7820176

Amount of Each Receipt this Period
1000.00

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

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

5000.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 66 OF 102 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
THE KEYSTONE FUND

Mailing Address **700 13TH STREET, NW
SUITE 600**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00381681**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : C7803285

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS

Mailing Address **80 W End Ave**

City **New York** State **NY** Zip Code **10023-6301**

FEC ID number of contributing federal political committee. **C C00008268**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : C7816861

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)
VERIZON COMMUNICATIONS INC. GOOD GOVERNMENT CLUB (VERIZON PAC)

Mailing Address **1300 I ST NW, STE 400 WEST
ATTN: TAYLOR CRAIG**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : C7844807

Amount of Each Receipt this Period

1000.00

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

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

4500.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 67 OF 102 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Full Name (Last, First, Middle Initial)
UNITEDHEALTH GROUP INCORPORATED PAC (UNITED FOR HEALTH)

Mailing Address 9900 BREN ROAD EAST

City State Zip Code
MINNETONKA MN 55343

FEC ID number of contributing federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : C7807378

Amount of Each Receipt this Period
1000.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
AMERIPAC: THE FUND FOR A GREATER AMERICA

Mailing Address 607 14th St, NW
Ste 800

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00271338

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : C7807378B

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

62000.00

**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 68 OF 102 | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. 26th Senate District DFL | | Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014 |
| Mailing Address 1130 6th Ave. SE | | Amount of Each Disbursement this Period 525.00 |
| City Rochester | State MN Zip Code 55903 | |
| Purpose of Disbursement Rent | Category/Type | Transaction ID : D559074 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. ADP, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014 |
| Mailing Address 8100 Old Cedar Ave S | | Amount of Each Disbursement this Period 99.50 |
| City Minneapolis | State MN Zip Code 55425-1803 | |
| Purpose of Disbursement Payroll Service | Category/Type | Transaction ID : D559062 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. ADP, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014 |
| Mailing Address 8100 Old Cedar Ave S | | Amount of Each Disbursement this Period 99.50 |
| City Minneapolis | State MN Zip Code 55425-1803 | |
| Purpose of Disbursement Payroll Service | Category/Type | Transaction ID : D560398 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|---------------|
| SUBTOTAL of Disbursements This Page (optional)..... | 724.00 |
| 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 69 OF 102 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|--|------------------------------|---|
| Full Name (Last, First, Middle Initial) A. ADP, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2014 |
| Mailing Address 8100 Old Cedar Ave S | | Amount of Each Disbursement this Period 99.50 |
| City Minneapolis | State MN Zip Code 55425-1803 | |
| Purpose of Disbursement Payroll Service | Candidate Name | Transaction ID : D560404 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | Category/Type | |

| | | |
|--|------------------------------|---|
| Full Name (Last, First, Middle Initial) B. American Express | | Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2014 |
| Mailing Address PO Box 53852 | | Amount of Each Disbursement this Period 379.70 |
| City Phoenix | State AZ Zip Code 85072-3852 | |
| Purpose of Disbursement Credit Card Processing Fees | Candidate Name | Transaction ID : D560397 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | Category/Type | |

| | | |
|--|------------------------------|---|
| Full Name (Last, First, Middle Initial) C. American Express | | Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014 |
| Mailing Address PO Box 53852 | | Amount of Each Disbursement this Period 7.95 |
| City Phoenix | State AZ Zip Code 85072-3852 | |
| Purpose of Disbursement Credit Card Processing Fees | Candidate Name | Transaction ID : D560392 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | Category/Type | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 487.15 |
| 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 70 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. AMS Communications | | Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014 |
| Mailing Address 500 Sansome Street Suite 404 | | Amount of Each Disbursement this Period 16326.35 |
| City San Francisco State CA Zip Code 94111 | Purpose of Disbursement Media Buy | Transaction ID : D559063 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. AMS Communications | | Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014 |
| Mailing Address 500 Sansome Street Suite 404 | | Amount of Each Disbursement this Period 32652.70 |
| City San Francisco State CA Zip Code 94111 | Purpose of Disbursement Media Buy | Transaction ID : D559064 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. AT&T Mobility | | Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014 |
| Mailing Address PO Box 6438 | | Amount of Each Disbursement this Period 190.37 |
| City Carol Stream State IL Zip Code 60197-6438 | Purpose of Disbursement Telephone | Transaction ID : D559065 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|-----------------|
| SUBTOTAL of Disbursements This Page (optional)..... | 49169.42 |
| 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 71 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. AT&T Mobility | | Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014 |
| Mailing Address PO Box 6438 | | Amount of Each Disbursement this Period 299.36 Transaction ID : D561036 |
| City Carol Stream | State IL | |
| Zip Code 60197-6438 | Purpose of Disbursement Telephone | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Benenson Strategy Group | | Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014 |
| Mailing Address 720 Colorado Blvd. | | Amount of Each Disbursement this Period 13000.00 Transaction ID : D559066 |
| City Denver | State CO | |
| Zip Code 80246 | Purpose of Disbursement Consulting - Research | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) c. Capital Accounting Services | | Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014 |
| Mailing Address 620 Wesley Commons Drive Ste 28 | | Amount of Each Disbursement this Period 1500.00 Transaction ID : D560396 |
| City Minneapolis | State MN | |
| Zip Code 55427 | Purpose of Disbursement Compliance Services | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 14799.36 |
| 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 72 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

Full Name (Last, First, Middle Initial)
A. Charter Communications

Mailing Address **Box 3149**

City **Milwaukee** State **WI** Zip Code **53201-3149**

Purpose of Disbursement
Internet/Telephone

Candidate Name

Office Sought: House Senate President

Disbursement For: **2014**
 Primary General Other (specify)

State: District:

Date of Disbursement
10 / 21 / 2014

Amount of Each Disbursement this Period
108.63

Transaction ID : **D559067**

Full Name (Last, First, Middle Initial)
B. Charter Communications

Mailing Address **Box 3149**

City **Milwaukee** State **WI** Zip Code **53201-3149**

Purpose of Disbursement
Internet/Telephone

Candidate Name

Office Sought: House Senate President

Disbursement For: **2016**
 Primary General Other (specify)

State: District:

Date of Disbursement
11 / 24 / 2014

Amount of Each Disbursement this Period
108.63

Transaction ID : **D561031**

Full Name (Last, First, Middle Initial)
c. Copier Business Solutions

Mailing Address **1715 Commerce Drive**

City **North Mankato** State **MN** Zip Code **56003**

Purpose of Disbursement
Copier

Candidate Name

Office Sought: House Senate President

Disbursement For: **2014**
 Primary General Other (specify)

State: District:

Date of Disbursement
10 / 21 / 2014

Amount of Each Disbursement this Period
421.63

Transaction ID : **D559068**

SUBTOTAL of Disbursements This Page (optional)..... **638.89**

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 73 OF 102 | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Credo Mobile | | Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014 |
| Mailing Address P.O. Box 480010 | | Amount of Each Disbursement this Period 52.50 |
| City Atlanta | State GA | |
| Zip Code 30346 | Purpose of Disbursement Telephone | Transaction ID : D559069 |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Credo Mobile | | Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014 |
| Mailing Address P.O. Box 480010 | | Amount of Each Disbursement this Period 106.21 |
| City Atlanta | State GA | |
| Zip Code 30346 | Purpose of Disbursement Telephone | Transaction ID : D561029 |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Employee Benefits Insurance Agency | | Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014 |
| Mailing Address P. O. Box 909 | | Amount of Each Disbursement this Period 850.00 |
| City Mankato | State MN | |
| Zip Code 56002 | Purpose of Disbursement Insurance | Transaction ID : D560401 |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1008.71 |
| 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 74 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Eventis | | Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014 |
| Mailing Address PO Box 3188 | | Amount of Each Disbursement this Period 94.23 |
| City Milwaukee | State WI | |
| Zip Code 53201 | Purpose of Disbursement Telephone | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: District: | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. GMMB Inc. | | Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014 |
| Mailing Address 1010 Wisconsin Ave NW | | Amount of Each Disbursement this Period 100953.72 |
| City Washington | State DC | |
| Zip Code 20007 | Purpose of Disbursement Media Buy | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: District: | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. GMMB Inc. | | Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014 |
| Mailing Address 1010 Wisconsin Ave NW | | Amount of Each Disbursement this Period 94379.00 |
| City Washington | State DC | |
| Zip Code 20007 | Purpose of Disbursement Media Buy | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) |
| State: District: | | |

| | |
|---|-----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 195426.95 |
| 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) | PAGE 75 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|---|-------------------------|--|
| Full Name (Last, First, Middle Initial) A. LexisNexis | | Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014 |
| Mailing Address PO Box 7247-7090 | | Amount of Each Disbursement this Period 173.00 Transaction ID : D560403 |
| City Philadelphia | State PA Zip Code 19170 | |
| Purpose of Disbursement Research Service | Candidate Name | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | | |

| | | |
|---|-------------------------|--|
| Full Name (Last, First, Middle Initial) B. Liberty Concepts | | Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014 |
| Mailing Address 119 Braintree St., Suite 101 | | Amount of Each Disbursement this Period 300.00 Transaction ID : D560395 |
| City Boston | State MA Zip Code 02134 | |
| Purpose of Disbursement Web Site | Candidate Name | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | | |

| | | |
|---|-------------------------|--|
| Full Name (Last, First, Middle Initial) c. Liberty Ventures | | Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014 |
| Mailing Address 104 East Liberty | | Amount of Each Disbursement this Period 700.00 Transaction ID : D560394 |
| City Mankato | State MN Zip Code 56001 | |
| Purpose of Disbursement Rent | Candidate Name | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1173.00 |
| 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 76 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | | |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial) A. Molly Allen Associates | | | Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014 |
| Mailing Address 209 Pennsylvania Ave. SE | | | Amount of Each Disbursement this Period 4014.68 Transaction ID : D560393 |
| 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 | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: District: | | | |

| | | | |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial) B. National Democratic Club | | | Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014 |
| Mailing Address 30 Ivy Street | | | Amount of Each Disbursement this Period 10.00 Transaction ID : D560389 |
| City Washington | State DC | Zip Code 20003 | |
| Purpose of Disbursement Dues | | Category/ Type | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: District: | | | |

| | | | |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial) c. National Democratic Club | | | Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014 |
| Mailing Address 30 Ivy Street | | | Amount of Each Disbursement this Period 20.00 Transaction ID : D561030 |
| City Washington | State DC | Zip Code 20003 | |
| Purpose of Disbursement Dues | | Category/ Type | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: District: | | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4044.68 |
| 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 77 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. NGPVAN, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014 |
| Mailing Address 1101 15th St. NW | | Amount of Each Disbursement this Period 150.00 Transaction ID : D561033 |
| City Washington State DC Zip Code 20005 | Purpose of Disbursement Database Services | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. NGPVAN, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014 |
| Mailing Address 1101 15th St. NW | | Amount of Each Disbursement this Period -1950.00 Transaction ID : D559057 |
| City Washington State DC Zip Code 20005 | Purpose of Disbursement Void Check | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Seven Corners Printing | | Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014 |
| Mailing Address 1099 Snelling Avenue N | | Amount of Each Disbursement this Period 7615.90 Transaction ID : D560391 |
| City Saint Paul State MN Zip Code 55108 | Purpose of Disbursement Printing | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5815.90 |
| 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 78 OF 102 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. SunTrust Merchant Bankcard

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 304

City Lakeland State FL Zip Code 33802-0304

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 12 / 2014

Amount of Each Disbursement this Period
1924.47

Transaction ID : D560402

B. United Strategies, LLC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 8292

City Minneapolis State MN Zip Code 55408

Purpose of Disbursement
Consulting - Fundraising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 03 / 2014

Amount of Each Disbursement this Period
5000.00

Transaction ID : D560390

c. United Strategies, LLC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 8292

City Minneapolis State MN Zip Code 55408

Purpose of Disbursement
Consulting - Fundraising/Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 17 / 2014

Amount of Each Disbursement this Period
5618.50

Transaction ID : D559077

SUBTOTAL of Disbursements This Page (optional)..... 12542.97

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 79 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. US Postal Service

Full Name (Last, First, Middle Initial)
Mailing Address 401 S 2nd St

City Mankato State MN Zip Code 56001-9998

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 16 / 2014

Amount of Each Disbursement this Period: 149.08

Transaction ID : D559075

B. US Postal Service

Full Name (Last, First, Middle Initial)
Mailing Address 401 S 2nd St

City Mankato State MN Zip Code 56001-9998

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 16 / 2014

Amount of Each Disbursement this Period: 703.35

Transaction ID : D559076

c. Tim and Gwen Walz

Full Name (Last, First, Middle Initial)
Mailing Address 12 Valley View Place

City Mankato State MN Zip Code 56001

Purpose of Disbursement Mileage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 24 / 2014

Amount of Each Disbursement this Period: 377.00

Transaction ID : D559072

SUBTOTAL of Disbursements This Page (optional) 1229.43

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 80 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | | |
|--|-------------|-------------------|--|
| Full Name (Last, First, Middle Initial) A. Tim and Gwen Walz | | | Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014 |
| Mailing Address 12 Valley View Place | | | Amount of Each Disbursement this Period 724.00 Transaction ID : D560399 |
| City Mankato | State MN | Zip Code 56001 | |
| Purpose of Disbursement Mileage | | Candidate Name | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | | |
| Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | State: District: | |

| | | | |
|--|-------------|-------------------|--|
| Full Name (Last, First, Middle Initial) B. Wells Fargo | | | Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014 |
| Mailing Address 206 E. Hickory St. | | | Amount of Each Disbursement this Period 3.00 Transaction ID : D560400 |
| City Mankato | State MN | Zip Code 56001 | |
| Purpose of Disbursement Bank Fees | | Candidate Name | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | | |
| Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | State: District: | |

| | | | |
|--|-------------|-------------------|--|
| Full Name (Last, First, Middle Initial) c. Wells Fargo | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014 |
| Mailing Address 206 E. Hickory St. | | | Amount of Each Disbursement this Period 103.50 Transaction ID : D559194 |
| City Mankato | State MN | Zip Code 56001 | |
| Purpose of Disbursement Bank Fees | | Candidate Name | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | | |
| Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | State: District: | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 830.50 |
| 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 81 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Wells Fargo | | Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014 |
| Mailing Address 206 E. Hickory St. | | Amount of Each Disbursement this Period 30.00 Transaction ID : D559078 |
| City Mankato State MN Zip Code 56001 | Purpose of Disbursement Bank Fees | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|---|--|
| Full Name (Last, First, Middle Initial) B. Wells Fargo | | Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014 |
| Mailing Address 206 E. Hickory St. | | Amount of Each Disbursement this Period 30.00 Transaction ID : D559079 |
| City Mankato State MN Zip Code 56001 | Purpose of Disbursement Bank Fees | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) c. Wells Fargo | | Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014 |
| Mailing Address 206 E. Hickory St. | | Amount of Each Disbursement this Period 30.00 Transaction ID : D559080 |
| City Mankato State MN Zip Code 56001 | Purpose of Disbursement Bank Fees | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|--------------|
| SUBTOTAL of Disbursements This Page (optional)..... | 90.00 |
| 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 82 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Wells Fargo | | Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014 |
| Mailing Address 206 E. Hickory St. | | Amount of Each Disbursement this Period 30.00 |
| City Mankato State MN Zip Code 56001 | Purpose of Disbursement Bank Fees | |
| Candidate Name | Category/Type | Transaction ID : D559081 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|--|--|---|
| Full Name (Last, First, Middle Initial) B. Wells Fargo | | Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014 |
| Mailing Address 206 E. Hickory St. | | Amount of Each Disbursement this Period 30.00 |
| City Mankato State MN Zip Code 56001 | Purpose of Disbursement Bank Fees | |
| Candidate Name | Category/Type | Transaction ID : D559082 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. ADP, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014 |
| Mailing Address 8100 Old Cedar Ave S | | Amount of Each Disbursement this Period 13391.07 |
| City Minneapolis State MN Zip Code 55425-1803 | Purpose of Disbursement Payroll - See Memos | |
| Candidate Name | Category/Type | Transaction ID : D557948 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 13451.07 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 83 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. ADP, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014 |
| Mailing Address 8100 Old Cedar Ave S | | Amount of Each Disbursement this Period 4701.59 |
| City Minneapolis | State MN | Zip Code 55425-1803 |
| Purpose of Disbursement Payroll Taxes | Category/Type | |
| Candidate Name | Transaction ID : D557949 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | [MEMO ITEM] | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Julie Anderson | | Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014 |
| Mailing Address 51566 200th Street | | Amount of Each Disbursement this Period 800.66 |
| City Lake Crystal | State MN | Zip Code 56055 |
| Purpose of Disbursement Payroll | Category/Type | |
| Candidate Name | Transaction ID : D557950 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | [MEMO ITEM] | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Joan E Christensen | | Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014 |
| Mailing Address 2146 Lor Ray Drive | | Amount of Each Disbursement this Period 230.88 |
| City Mankato | State MN | Zip Code 56003 |
| Purpose of Disbursement Payroll | Category/Type | |
| Candidate Name | Transaction ID : D557951 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | [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 84 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|--|--------------------|--|
| Full Name (Last, First, Middle Initial) A. Amanda Frie | | Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014 |
| Mailing Address 219 1/2 W Nassau St. #2 | | Amount of Each Disbursement this Period 1275.79 |
| City Saint Peter State MN Zip Code 56082 | Category/Type | |
| Purpose of Disbursement Payroll | Candidate Name | Transaction ID : D557952 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | [MEMO ITEM] | |

| | | |
|--|--------------------|--|
| Full Name (Last, First, Middle Initial) B. Cole Peterson | | Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014 |
| Mailing Address 5201 Chicago Street | | Amount of Each Disbursement this Period 791.48 |
| City Omaha State NE Zip Code 68132 | Category/Type | |
| Purpose of Disbursement Payroll | Candidate Name | Transaction ID : D557953 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | [MEMO ITEM] | |

| | | |
|--|--------------------|--|
| Full Name (Last, First, Middle Initial) c. Evan Scott Peterson | | Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014 |
| Mailing Address 13389 Granada Ave | | Amount of Each Disbursement this Period 2567.70 |
| City Apple Valley State MN Zip Code 55124 | Category/Type | |
| Purpose of Disbursement Payroll | Candidate Name | Transaction ID : D557954 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | [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**

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|---|---|----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 85 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Sara Severs | | Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014 |
| Mailing Address 225 Belgrade Ave Apt B | | Amount of Each Disbursement this Period 3022.97 |
| City Mankato | State MN | |
| Zip Code 56003 | Purpose of Disbursement Payroll | Transaction ID : D557955 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Molly Allen Associates | | Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014 |
| Mailing Address 209 Pennsylvania Ave. SE | | Amount of Each Disbursement this Period 4645.98 |
| City Washington | State DC | |
| Zip Code 20003 | Purpose of Disbursement Consulting - Fundraising/Memo | Transaction ID : D559073 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Nooshi | | Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014 |
| Mailing Address 524 8th Street SE | | Amount of Each Disbursement this Period 614.06 |
| City Washington | State DC | |
| Zip Code 20003 | Purpose of Disbursement Event Cost - Catering | Transaction ID : D559090 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4645.98 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 86 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Wells Fargo | | Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014 |
| Mailing Address 206 E. Hickory St. | | Amount of Each Disbursement this Period 23.85 |
| City Mankato State MN Zip Code 56001 | Purpose of Disbursement Credit Card Payment - See Memos | |
| Candidate Name | Category/Type | Transaction ID : D559083 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Delta Airlines | | Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014 |
| Mailing Address 1030 Delta Blvd PO Box 20706 | | Amount of Each Disbursement this Period 11.20 |
| City Atlanta State GA Zip Code 30320-6001 | Purpose of Disbursement Travel | |
| Candidate Name | Category/Type | Transaction ID : D559093 [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Wells Fargo | | Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014 |
| Mailing Address 206 E. Hickory St. | | Amount of Each Disbursement this Period 266.12 |
| City Mankato State MN Zip Code 56001 | Purpose of Disbursement Credit Card Payment - See Memos | |
| Candidate Name | Category/Type | Transaction ID : D559085 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 289.97 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 87 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Intuit | | Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014 |
| Mailing Address 2632 Marine Way | | Amount of Each Disbursement this Period 23.97 |
| City Mountain View | State CA | |
| Zip Code 94043 | Purpose of Disbursement Software | Transaction ID : D559105 [MEMO ITEM] |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|--|---|
| Full Name (Last, First, Middle Initial) B. US Postal Service | | Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014 |
| Mailing Address 401 S 2nd St | | Amount of Each Disbursement this Period 160.68 |
| City Mankato | State MN | |
| Zip Code 56001-9998 | Purpose of Disbursement Postage | Transaction ID : D559102 [MEMO ITEM] |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. US Postal Service | | Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014 |
| Mailing Address 401 S 2nd St | | Amount of Each Disbursement this Period 74.56 |
| City Mankato | State MN | |
| Zip Code 56001-9998 | Purpose of Disbursement Postage | Transaction ID : D559113 [MEMO ITEM] |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| 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 88 OF 102 | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Wells Fargo | | Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014 |
| Mailing Address 206 E. Hickory St. | | Amount of Each Disbursement this Period 275.27 |
| City Mankato State MN Zip Code 56001 | Purpose of Disbursement Credit Card Payment - See Memos | |
| Candidate Name | Category/Type | Transaction ID : D559086 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Intuit | | Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014 |
| Mailing Address 2632 Marine Way | | Amount of Each Disbursement this Period 23.97 |
| City Mountain View State CA Zip Code 94043 | Purpose of Disbursement Software | |
| Candidate Name | Category/Type | Transaction ID : D559103 [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|--|--|---|
| Full Name (Last, First, Middle Initial) c. Wells Fargo | | Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014 |
| Mailing Address 206 E. Hickory St. | | Amount of Each Disbursement this Period 285.12 |
| City Mankato State MN Zip Code 56001 | Purpose of Disbursement Credit Card Payment - See Memos | |
| Candidate Name | Category/Type | Transaction ID : D559087 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 560.39 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 89 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Number 4 American Bar | | Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014 |
| Mailing Address 124 E Walnut St | | Amount of Each Disbursement this Period 141.46 |
| City Mankato State MN Zip Code 56001 | Purpose of Disbursement Meals | |
| Candidate Name | | Transaction ID : D559117 [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/Type | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Wells Fargo | | Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014 |
| Mailing Address 206 E. Hickory St. | | Amount of Each Disbursement this Period 1.99 |
| City Mankato State MN Zip Code 56001 | Purpose of Disbursement Bank Fees | |
| Candidate Name | | Transaction ID : D559108 [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/Type | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Wells Fargo | | Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014 |
| Mailing Address 206 E. Hickory St. | | Amount of Each Disbursement this Period 1028.08 |
| City Mankato State MN Zip Code 56001 | Purpose of Disbursement Credit Card Payment - See Memos | |
| Candidate Name | | Transaction ID : D559088 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/Type | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1028.08 |
| 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 90 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. Cub Foods

Full Name (Last, First, Middle Initial)
Mailing Address 1200 S Riverfront Dr

City Mankato State MN Zip Code 56001

Purpose of Disbursement Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 29 / 2014

Amount of Each Disbursement this Period: 85.52

Transaction ID : D559123

[MEMO ITEM]

B. Intuit

Full Name (Last, First, Middle Initial)
Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement Software

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 29 / 2014

Amount of Each Disbursement this Period: 23.97

Transaction ID : D559104

[MEMO ITEM]

c. US Postal Service

Full Name (Last, First, Middle Initial)
Mailing Address 401 S 2nd St

City Mankato State MN Zip Code 56001-9998

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 29 / 2014

Amount of Each Disbursement this Period: 19.99

Transaction ID : D559114

[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 91 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. US Postal Service | | Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014 |
| Mailing Address 401 S 2nd St | | Amount of Each Disbursement this Period 178.30 |
| City Mankato State MN Zip Code 56001-9998 | Purpose of Disbursement Postage | |
| Candidate Name | Category/Type | Transaction ID : D559115 [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Wells Fargo | | Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014 |
| Mailing Address 206 E. Hickory St. | | Amount of Each Disbursement this Period 8.71 |
| City Mankato State MN Zip Code 56001 | Purpose of Disbursement Bank Fees | |
| Candidate Name | Category/Type | Transaction ID : D559109 [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Wells Fargo | | Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014 |
| Mailing Address 206 E. Hickory St. | | Amount of Each Disbursement this Period 20.00 |
| City Mankato State MN Zip Code 56001 | Purpose of Disbursement Bank Fees | |
| Candidate Name | Category/Type | Transaction ID : D559110 [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 92 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Wells Fargo | | Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014 |
| Mailing Address 206 E. Hickory St. | | Amount of Each Disbursement this Period 1754.88 |
| City Mankato State MN Zip Code 56001 | Category/Type | |
| Purpose of Disbursement Credit Card Payment - See Memos | | Transaction ID : D559089 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. AT&T Mobility | | Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014 |
| Mailing Address PO Box 6438 | | Amount of Each Disbursement this Period 51.62 |
| City Carol Stream State IL Zip Code 60197-6438 | Category/Type | |
| Purpose of Disbursement Telephone | | Transaction ID : D559095 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

[MEMO ITEM]

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Delta Airlines | | Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014 |
| Mailing Address 1030 Delta Blvd PO Box 20706 | | Amount of Each Disbursement this Period 371.20 |
| City Atlanta State GA Zip Code 30320-6001 | Category/Type | |
| Purpose of Disbursement Travel | | Transaction ID : D559092 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

[MEMO ITEM]

| | |
|---|----------------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1754.88 |
| 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) | PAGE 93 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Midwest Cellular | | Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014 |
| Mailing Address 3151 Pleasant Run | | Amount of Each Disbursement this Period 538.87 |
| City Springfield | State IL | |
| Zip Code 62711 | | |
| Purpose of Disbursement Telephone | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Paglia's Pizza | | Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014 |
| Mailing Address 524 South Front Street | | Amount of Each Disbursement this Period 48.27 |
| City Mankato | State MN | |
| Zip Code 56001 | | |
| Purpose of Disbursement Meals | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. ADP, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014 |
| Mailing Address 8100 Old Cedar Ave S | | Amount of Each Disbursement this Period 13290.29 |
| City Minneapolis | State MN | |
| Zip Code 55425-1803 | | |
| Purpose of Disbursement Payroll - See Memos | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 13290.29 |
| 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 94 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. ADP, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014 |
| Mailing Address 8100 Old Cedar Ave S | | Amount of Each Disbursement this Period 4600.81 |
| City Minneapolis | State MN | |
| Zip Code 55425-1803 | Purpose of Disbursement Payroll Taxes | Transaction ID : D560050 |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Julie Anderson | | Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014 |
| Mailing Address 51566 200th Street | | Amount of Each Disbursement this Period 800.66 |
| City Lake Crystal | State MN | |
| Zip Code 56055 | Purpose of Disbursement Payroll | Transaction ID : D560051 |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Joan E Christensen | | Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014 |
| Mailing Address 2146 Lor Ray Drive | | Amount of Each Disbursement this Period 230.87 |
| City Mankato | State MN | |
| Zip Code 56003 | Purpose of Disbursement Payroll | Transaction ID : D560052 |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | |
|---|------|
| 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 95 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Amanda Frie | | Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014 |
| Mailing Address 219 1/2 W Nassau St. #2 | | Amount of Each Disbursement this Period 1275.80 |
| City Saint Peter | State MN | |
| Zip Code 56082 | Purpose of Disbursement Payroll | Transaction ID : D560053 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Cole Peterson | | Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014 |
| Mailing Address 5201 Chicago Street | | Amount of Each Disbursement this Period 791.48 |
| City Omaha | State NE | |
| Zip Code 68132 | Purpose of Disbursement Payroll | Transaction ID : D560054 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Evan Scott Peterson | | Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014 |
| Mailing Address 13389 Granada Ave | | Amount of Each Disbursement this Period 2567.70 |
| City Apple Valley | State MN | |
| Zip Code 55124 | Purpose of Disbursement Payroll | Transaction ID : D560055 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | |
|---|------|
| 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 96 OF 102 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|--|---------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Sara Severs | | Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014 |
| Mailing Address 225 Belgrade Ave Apt B | | Amount of Each Disbursement this Period 6000.00 Transaction ID : D560057 |
| City Mankato State MN Zip Code 56003 | Purpose of Disbursement Payroll | |
| Candidate Name | Category/Type | [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Julie Anderson | | Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014 |
| Mailing Address 51566 200th Street | | Amount of Each Disbursement this Period 60.00 Transaction ID : D560387 |
| City Lake Crystal State MN Zip Code 56055 | Purpose of Disbursement Reimbursement - See Memo | |
| Candidate Name | Category/Type | [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) c. AT&T Mobility | | Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014 |
| Mailing Address PO Box 6438 | | Amount of Each Disbursement this Period 60.00 Transaction ID : D560388 |
| City Carol Stream State IL Zip Code 60197-6438 | Purpose of Disbursement Telephone | |
| Candidate Name | Category/Type | [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | |
|---|-------|
| SUBTOTAL of Disbursements This Page (optional)..... | 60.00 |
| 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 97 OF 102 | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Julie Anderson | | Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2014 |
| Mailing Address 51566 200th Street | | Amount of Each Disbursement this Period 60.00 |
| City Lake Crystal | State MN | |
| Zip Code 56055 | Purpose of Disbursement Reimbursement - See Memo | Transaction ID : D561034 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. AT&T Mobility | | Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2014 |
| Mailing Address PO Box 6438 | | Amount of Each Disbursement this Period 60.00 |
| City Carol Stream | State IL | |
| Zip Code 60197-6438 | Purpose of Disbursement Telephone | Transaction ID : D561027 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | Amount of Each Disbursement this Period |
| City | State | |
| Zip Code | Purpose of Disbursement | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|-----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 60.00 |
| TOTAL This Period (last page this line number only)..... | 323121.62 |

**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 98 OF 102 | | | |
| | <input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21 | | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Linda Judd | | Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014 |
| Mailing Address 156 Sylvan Rd. | | Amount of Each Disbursement this Period 1200.00 |
| City Walnut Creek | State CA | |
| Zip Code 94596 | Purpose of Disbursement Refund | Transaction ID : D556727 |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | Amount of Each Disbursement this Period |
| City | State | |
| Zip Code | Purpose of Disbursement | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | Amount of Each Disbursement this Period |
| City | State | |
| Zip Code | Purpose of Disbursement | |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|----------------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1200.00 |
| TOTAL This Period (last page this line number only)..... | 1200.00 |

**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 99 OF 102 | | | |
| | <input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

A. BRAD ASHFORD FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 24023

City OMAHA State NE Zip Code 68124

Purpose of Disbursement Contribution

Candidate Name **BRAD ASHFORD**

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: NE District: 02

Date of Disbursement: 11 / 12 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : D561024

B. DR. RAUL RUIZ FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 6116

City LA QUINTA State CA Zip Code 92248

Purpose of Disbursement Contribution

Candidate Name **RAUL DR. RUIZ**

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: CA District: 36

Date of Disbursement: 11 / 12 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : D561022

C. JULIA BROWNLEY FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 2018

City THOUSAND OAKS State CA Zip Code 91358

Purpose of Disbursement Contribution

Candidate Name **JULIA BROWNLEY**

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify)

State: CA District: 26

Date of Disbursement: 11 / 12 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : D561021

SUBTOTAL of Disbursements This Page (optional)..... 1500.00

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 100 OF 102 | | | |
| | <input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. KIRKPATRICK FOR ARIZONA | | Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014 |
| Mailing Address PO BOX 12011 | | Amount of Each Disbursement this Period 500.00 Transaction ID : D561020 |
| City CASA GRANDE | State AZ | |
| Zip Code 85130 | Purpose of Disbursement Contribution | Category/ Type |
| Candidate Name ANN KIRKPATRICK | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: AZ District: 01 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Minnesota DFL | | Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014 |
| Mailing Address 255 East Plato Blvd. | | Amount of Each Disbursement this Period 15000.00 Transaction ID : D559054 |
| City Saint Paul | State MN | |
| Zip Code 55107 | Purpose of Disbursement Unlimited Transfer to State Party | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Minnesota DFL | | Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014 |
| Mailing Address 255 East Plato Blvd. | | Amount of Each Disbursement this Period 15000.00 Transaction ID : D559055 |
| City Saint Paul | State MN | |
| Zip Code 55107 | Purpose of Disbursement Unlimited Transfer to State Party | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 30500.00 |
| 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 OF 102 | | | |
| | <input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Minnesota DFL | | Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014 |
| Mailing Address 255 East Plato Blvd. | | Amount of Each Disbursement this Period 15000.00 Transaction ID : D559056 |
| City Saint Paul | State MN | |
| Zip Code 55107 | Purpose of Disbursement Unlimited Transfer to State Party | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. MOULTON FOR CONGRESS COMMITTEE | | Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014 |
| Mailing Address PO BOX 2013 | | Amount of Each Disbursement this Period 500.00 Transaction ID : D561025 |
| City SALEM | State MA | |
| Zip Code 01970 | Purpose of Disbursement Contribution | Category/ Type |
| Candidate Name SETH MOULTON | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: MA District: 06 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE | | Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014 |
| Mailing Address PO BOX 1041 | | Amount of Each Disbursement this Period 500.00 Transaction ID : D561026 |
| City BRAINERD | State MN | |
| Zip Code 56401 | Purpose of Disbursement Contribution | Category/ Type |
| Candidate Name RICHARD MICHAEL NOLAN | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2016 | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: MN District: 08 | | |

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|---|-----------------|
| SUBTOTAL of Disbursements This Page (optional)..... | 16000.00 |
| 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 102 OF 102 | |
| | <input type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input checked="" type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Tim Walz for US Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. RON BARBER FOR CONGRESS | | Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014 |
| Mailing Address PO BOX 57715 | | Amount of Each Disbursement this Period 500.00 Transaction ID : D561023 |
| City TUCSON State AZ Zip Code 85732 | Purpose of Disbursement Contribution | |
| Candidate Name RONALD BARBER | Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Recount | |
| State: AZ District: 02 | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | Amount of Each Disbursement this Period |
| City | State Zip Code | |
| Purpose of Disbursement | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | Amount of Each Disbursement this Period |
| City | State Zip Code | |
| Purpose of Disbursement | Category/Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|-----------------|
| SUBTOTAL of Disbursements This Page (optional)..... | 500.00 |
| TOTAL This Period (last page this line number only)..... | 48500.00 |