

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Maureen Reed for Congress

ADDRESS (number and street) PO Box 548

Check if different than previously reported. (ACC) Stillwater MN 55082

2. **FEC IDENTIFICATION NUMBER** C00461798 **CITY** **STATE** MN **ZIP CODE** MN 06 **STATE** **DISTRICT**

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on in the State of

5. Covering Period 10 01 2009 through 12 31 2009

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

Type or Print Name of Treasurer Tim Sheehan

Signature of Treasurer Electronically Filed by Tim Sheehan Date 01 31 2011

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									
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FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Maureen Reed for Congress

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	207851.00	574625.00
(b) Total Contribution Refunds (from Line 20(d)).....	200.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	207651.00	574425.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	130844.72	185950.24
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	130844.72	185950.24
8. Cash on Hand at Close of Reporting Period (from Line 27).....	388474.76	
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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Maureen Reed for Congress

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	165202.00	503927.00
(i) Itemized (use Schedule A).....	40649.00	67198.00
(ii) Unitemized.....	205851.00	571125.00
(iii) TOTAL of contributions from individuals..... ▶	0.00	250.00
(b) Political Party Committees.....	2000.00	3250.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	207851.00	574625.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	207851.00	574625.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	130844.72	185950.24
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	200.00	200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	200.00	200.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	131044.72	186150.24

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	311668.48
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	207851.00
25. SUBTOTAL (add Line 23 and Line 24).....	519519.48
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	131044.72
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	388474.76

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 155
(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)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Elizabeth Abraham

Mailing Address 3526 W 28th St

City State Zip Code
Minneapolis MN 55416

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

Name of Employer Occupation
Top Tool Co. CEO

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

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

Transaction ID: C2077560

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Darlene Abt

Mailing Address 190 Ventana Sierra Drive

City State Zip Code
Grass Valley CA 95945

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

Name of Employer Occupation
AJA Video Systems Inc Executive Director/Officer

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

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

Transaction ID: C2076060

Amount of Each Receipt this Period
2400.00

C.

Full Name (Last, First, Middle Initial)
John STEPHEN Adams

Mailing Address 2611 W49th St

City State Zip Code
Minneapolis MN 55410

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

Name of Employer Occupation
U of M Professor

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

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

Transaction ID: C2076914

Amount of Each Receipt this Period
100.00

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

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

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

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

FOR LINE NUMBER: PAGE 6 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Charles E Adwell, M.D.
Mailing Address 1828 Central Ave

City State Zip Code
Memphis TN 38104-5236

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

Name of Employer Information Requested Occupation
Occupation Pediatric Anesthesiologist

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

Date of Receipt

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

Transaction ID: C2080089
 Amount of Each Receipt this Period
 250.00

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Thomas Akenson
Mailing Address 2906 Darling Dr NW

City State Zip Code
Alexandria MN 56308

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

Name of Employer self-employed Occupation
Occupation real estate

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

Date of Receipt

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

Transaction ID: C2064792
 Amount of Each Receipt this Period
 500.00

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Gordon Alexander, M.D.
Mailing Address

City State Zip Code
Chanhassen MN 55317

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

Name of Employer University of MN Occupation
Occupation Medical Center

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

Date of Receipt

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

Transaction ID: C2077839
 Amount of Each Receipt this Period
 800.00

Amount of Each Receipt this Period
800.00

SUBTOTAL of Receipts This Page (optional) ► **1550.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 155 (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

<p>A. Full Name (Last, First, Middle Initial) Susan Alpert, M.D. Mailing Address 200 Park Ave Unit 403</p> <table style="width: 100%;"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Minneapolis</td> <td>MN</td> <td>55415</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 30%;">Name of Employer Medtronic</td> <td>Occupation Executive</td> </tr> </table> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Election Cycle-to-Date ▼ 1000.00</p>	City	State	Zip Code	Minneapolis	MN	55415	Name of Employer Medtronic	Occupation Executive	<p>Date of Receipt <table style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Transaction ID: C2064387</p> <p>Amount of Each Receipt this Period 1000.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	7		2	0	0	9
City	State	Zip Code																											
Minneapolis	MN	55415																											
Name of Employer Medtronic	Occupation Executive																												
M	M	/	D	D	/	Y	Y	Y	Y																				
1	1		1	7		2	0	0	9																				

<p>B. Full Name (Last, First, Middle Initial) Trevor Ames Mailing Address 3303 32nd Ave NE</p> <table style="width: 100%;"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>St. Anthony</td> <td>MN</td> <td>55418</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 30%;">Name of Employer U of M</td> <td>Occupation Dean</td> </tr> </table> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Election Cycle-to-Date ▼ 250.00</p>	City	State	Zip Code	St. Anthony	MN	55418	Name of Employer U of M	Occupation Dean	<p>Date of Receipt <table style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Transaction ID: C2076921</p> <p>Amount of Each Receipt this Period 250.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	7		2	0	0	9
City	State	Zip Code																											
St. Anthony	MN	55418																											
Name of Employer U of M	Occupation Dean																												
M	M	/	D	D	/	Y	Y	Y	Y																				
1	2		2	7		2	0	0	9																				

<p>C. Full Name (Last, First, Middle Initial) Daniel Anderson Mailing Address 100 Third Ave S, #2002</p> <table style="width: 100%;"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Minneapolis</td> <td>MN</td> <td>55401</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 30%;">Name of Employer AdvisorNet Financial</td> <td>Occupation Chairman</td> </tr> </table> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Election Cycle-to-Date ▼ 500.00</p>	City	State	Zip Code	Minneapolis	MN	55401	Name of Employer AdvisorNet Financial	Occupation Chairman	<p>Date of Receipt <table style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Transaction ID: C2062512</p> <p>Amount of Each Receipt this Period 500.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	7		2	0	0	9
City	State	Zip Code																											
Minneapolis	MN	55401																											
Name of Employer AdvisorNet Financial	Occupation Chairman																												
M	M	/	D	D	/	Y	Y	Y	Y																				
1	1		0	7		2	0	0	9																				

SUBTOTAL of Receipts This Page (optional)	1750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 155

(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Cynthia K. Anonsen

Mailing Address 1135 116th Ave NE Ste 500

City State Zip Code
Bellevue WA 98004

FEC ID number of contributing federal political committee. C

Name of Employer
Proliance Surgeons

Occupation
physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 16 / 2009

Transaction ID: C2073831

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Sally A Anson

Mailing Address 3220 W Calhoun Pky. #502
Apt 502

City State Zip Code
Minneapolis MN 55416

FEC ID number of contributing federal political committee. C

Name of Employer
Homemaker

Occupation
retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1700.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2009

Transaction ID: C2077786

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Roger Appeldorn

Mailing Address 10055 Hadley Ave N

City State Zip Code
Grant MN 55110

FEC ID number of contributing federal political committee. C

Name of Employer
N/A

Occupation
Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 08 / 2009

Transaction ID: C2071285

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) 1250.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Gordon B. Asselstine

Mailing Address 4408 Country Club Rd

City State Zip Code
Minneapolis MN 55424

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

Transaction ID: C2075954

Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Horace Brewster Atwater, Jr.

Mailing Address 636 Ferndale Rd.

City State Zip Code
Wayzata MN 55391

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired (Chairman of General Mills)

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: C2073851

Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Tom P. Aufderheide

Mailing Address 8116 Milwaukee Ave

City State Zip Code
Wauwatosa WI 53213

FEC ID number of contributing federal political committee. C

Name of Employer Medical College of WI Occupation physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: C2070662

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) 2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Douglas MARTIN Baker

Mailing Address 101 Main St NE

City State Zip Code
Minneapolis MN 55413

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

Name of Employer Self -Consultant Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 24 / 2009
Transaction ID: C2068264
 Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mark W. Banks

Mailing Address 4634 Edgebrook Place

City State Zip Code
Edina MN 55424

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

Name of Employer None Occupation Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 12 / 31 / 2009
Transaction ID: C2077852
 Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Bonnie Baskin

Mailing Address 6104 Fox Meadow Lane

City State Zip Code
Edina MN 55436

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

Name of Employer none Occupation none

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 08 / 2009
Transaction ID: C2047362
 Amount of Each Receipt this Period: 2400.00

SUBTOTAL of Receipts This Page (optional) ► **3650.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Maureen Beck

Mailing Address 4349 Fremont Ave S

City State Zip Code
Minneapolis MN 55409

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

Name of Employer Self Employed Occupation Self Employed

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: C2049448

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Michael Belzer

Mailing Address 4811 Bywood West

City State Zip Code
Edina MN 55436

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

Name of Employer HCMC Occupation CMO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: C2071810

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Barbara Bencini

Mailing Address 2608 Cromwell

City State Zip Code
Minneapolis MN 55410

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

Name of Employer Merrill Lynch Occupation Financial Advisor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: C2062379

Amount of Each Receipt this Period
1000.00

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

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

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

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

FOR LINE NUMBER: PAGE 12 / 155

(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Russell M Bennett

Mailing Address 21957 Minnetonka Blvd
St. Albans Bay Villas #20

City State Zip Code
Excelsior MN 55331-5604

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

Name of Employer Occupation
Gray Plant Mooty Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1600.00

Date of Receipt

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

Transaction ID: C2076207

Amount of Each Receipt this Period
100.00

B.

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

Mailing Address 4950 Neal Ave N

City State Zip Code
Stillwater MN 55082

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

Name of Employer Occupation
Bergh Int. Holdings Business Owner

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

Date of Receipt

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

Transaction ID: C2066635

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Michael Berman

Mailing Address 10727 Genevieve Lane

City State Zip Code
Minnetonka MN 55305

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

Name of Employer Occupation
Berman Medical Management

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

Date of Receipt

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

Transaction ID: C2075672

Amount of Each Receipt this Period
250.00

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: PAGE 13 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Uldis (John) Berzins, M.D.
Mailing Address 3416 Cherokee Dr.S.
City Salem State OR Zip Code 97302
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation physician
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 12 / 30 / 2009
Transaction ID: C2077467
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Marsha J. Beyer
Mailing Address 1964 117th Ave
City Dresser State WI Zip Code 54009
FEC ID number of contributing federal political committee. **C**
Name of Employer St. Croix Regional Medical Center Occupation Family Medicine
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 12 / 31 / 2009
Transaction ID: C2079942
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
thomas A BIGGS
Mailing Address 3088 w owasso Blvd
City roseville State MN Zip Code 55113
FEC ID number of contributing federal political committee. **C**
Name of Employer THOMAS A BIGGS Occupation physician
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 12 / 30 / 2009
Transaction ID: C2077722
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 155

(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Candace Birk

Mailing Address 8450 166th Cir NW

City State Zip Code
Ramsey MN 55303

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

Name of Employer Occupation
HealthPartners Nurse

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 752.00

Date of Receipt

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

Transaction ID: C2062372

Amount of Each Receipt this Period

752.00

B.

Full Name (Last, First, Middle Initial)
Douglas Blanke

Mailing Address 650 North Main Street Unit 403

City State Zip Code
Stillwater MN 55082

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

Name of Employer Occupation
William Mitchell Law School Director of Tobacco Law Center

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

Date of Receipt

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

Transaction ID: C2078016

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Carla Blumberg

Mailing Address 1924 E 8th St

City State Zip Code
Duluth MN 55812

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

Name of Employer Occupation
Self Employed Cafe Owner

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

Date of Receipt

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

Transaction ID: C2075787

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1752.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Carla Blumberg

Mailing Address 1924 E 8th St

City State Zip Code
Duluth MN 55812

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

Name of Employer Self Employed Occupation
Self Employed Cafe Owner

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

Date of Receipt

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

Transaction ID: C2076929

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date Amount: 1000.00

B.

Full Name (Last, First, Middle Initial)
Dallas F Bohnsack

Mailing Address 5550 Bohnsack Way

City State Zip Code
New Prague MN 56071

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

Name of Employer Self Employed Occupation
Self Employed University Regent

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

Date of Receipt

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

Transaction ID: C2055415

Amount of Each Receipt this Period
250.00

Election Cycle-to-Date Amount: 250.00

C.

Full Name (Last, First, Middle Initial)
Joel Bonda

Mailing Address 1333 Kienas Road

City State Zip Code
Kalispell MT 59901

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

Name of Employer Self Occupation
Self Photographer

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

Date of Receipt

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

Transaction ID: C2076648

Amount of Each Receipt this Period
1000.00

Election Cycle-to-Date Amount: 1000.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 155
(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Sharon Borine

Mailing Address 18285 Croixwood Ln

City State Zip Code
Eden Prairie MN 55347

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

Name of Employer Self Employed Occupation
Self Employed Consultant

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

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

Transaction ID: C2077244

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Robert H. Bosl, M.D.

Mailing Address 28018 South Shore Drive

City State Zip Code
Starbuck MN 56381

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

Name of Employer Community Medical Center Occupation
Stevens Community Medical Center Physician

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

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

Transaction ID: C2070899

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Andrew Andrew Boss

Mailing Address 2247 Hendon Ave

City State Zip Code
Saint Paul MN 55108

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

Name of Employer Self Employed Occupation
Self Employed Consultant

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

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

Transaction ID: C2047756

Amount of Each Receipt this Period
1200.00

SUBTOTAL of Receipts This Page (optional) ► **2200.00**

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

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

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

FOR LINE NUMBER: PAGE 17 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Linda Boss

Mailing Address 2247 Hendon Ave

City State Zip Code
Saint Paul MN 55108

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

Name of Employer Self Employed Occupation Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2047757

Amount of Each Receipt this Period
1200.00

Election Cycle-to-Date ▼ 1200.00

B. Full Name (Last, First, Middle Initial)
Claire Butler

Mailing Address 960 Sherwood Rd

City State Zip Code
Shoreview MN 55126

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

Name of Employer healthpartners Occupation physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2077900

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date ▼ 500.00

C. Full Name (Last, First, Middle Initial)
Nancy S Cambronne

Mailing Address 7310 Duluth St

City State Zip Code
Golden Valley MN 55427

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

Name of Employer None Occupation Not Employed

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2076915

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date ▼ 500.00

SUBTOTAL of Receipts This Page (optional) ► **2200.00**

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 18 / 155
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) Diane Carlson	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 0 9
	Mailing Address 2496 Old Beach Rd	Transaction ID: C2077532
	City State Zip Code Wayzata MN 55391	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Phibro Animal Health	Occupation CEO	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) Marilyn Carlson Nelson	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 9
	Mailing Address 301 Carlson Parkway Suite 275	Transaction ID: C2055412
	City State Zip Code Minnetonka MN 55305	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Carlson Companies	Occupation CEO	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00	

C.	Full Name (Last, First, Middle Initial) Harlan Cavert	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 0 / 2 0 0 9
	Mailing Address 100 2nd St SE	Transaction ID: C2066138
	City State Zip Code Minneapolis MN 55414	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
Name of Employer U of M	Occupation Development	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	4700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

<p>A. Full Name (Last, First, Middle Initial) Winston Cavert</p> <p>Mailing Address 2900 E 24th Street</p> <p>City State Zip Code Minneapolis MN 55406</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation University of Minnesota Physician</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 400.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9</p> <p>Transaction ID: C2077814</p> <p>Amount of Each Receipt this Period 400.00</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) Stephen P. Cawley</p> <p>Mailing Address 3330 Xanthus Lane N</p> <p>City State Zip Code Minneapolis MN 55447</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation University of MN Professor</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 9</p> <p>Transaction ID: C2062385</p> <p>Amount of Each Receipt this Period 500.00</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Duane D Cekalla</p> <p>Mailing Address 362 125th St NE</p> <p>City State Zip Code Rice MN 56367</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation N/A Retired</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 700.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 9</p> <p>Transaction ID: C2077230</p> <p>Amount of Each Receipt this Period 500.00</p>
--	---

SUBTOTAL of Receipts This Page (optional)	1400.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 20 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
William Chadwick

Mailing Address 16404 Norwood Ln

City State Zip Code
Minnetonka MN 55345

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

Name of Employer Presbyterian Homes and Services
Occupation Chaplain

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: C2077243

Amount of Each Receipt this Period
250.00

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Jeffrey W. Chell

Mailing Address 2907 12th St NW

City State Zip Code
New Brighton MN 55112

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

Name of Employer National Marrow Donor Program
Occupation CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: C2076971

Amount of Each Receipt this Period
1000.00

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Polly Cherner

Mailing Address 30 South Oak Ave

City State Zip Code
San Anselmo CA 94960

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

Name of Employer Self-Employed
Occupation Educator

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: C2077611

Amount of Each Receipt this Period
500.00

Amount of Each Receipt this Period
1500.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 155

(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
maria christu

Mailing Address 5277 lochloy drive

City State Zip Code
edina MN 55436

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

Name of Employer Occupation
children's health care attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 550.00

Date of Receipt

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

Transaction ID: C2077918

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
Calvin W. Clark

Mailing Address 223 Eagle Pkwy

City State Zip Code
Saint Paul MN 55102

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

Name of Employer Occupation
N/A Retired

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

Date of Receipt

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

Transaction ID: C2076209

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Jerry Cohen

Mailing Address 6788 132nd St. No.

City State Zip Code
White Bear Lake MN 55110

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

Name of Employer Occupation
University of Minnesota Professor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 550.00

Date of Receipt

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

Transaction ID: C2043082

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 22 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Jerry Cohen

Mailing Address 6788 132nd St. No.

City State Zip Code
White Bear Lake MN 55110

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

Name of Employer Occupation
University of Minnesota Professor

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

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

Transaction ID: C2076947

Amount of Each Receipt this Period
100.00

550.00

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

Mailing Address 700 South 2nd St #91

City State Zip Code
Minneapolis MN 55401

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

Name of Employer Occupation
Retired Retired

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

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

Transaction ID: C2069623

Amount of Each Receipt this Period
1400.00

2400.00

C. Full Name (Last, First, Middle Initial)
Ruth Craig

Mailing Address 5 Bell Waver Way

City State Zip Code
Oakland CA 94619

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

Name of Employer Occupation
self physician/consultant

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

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

Transaction ID: C2077727

Amount of Each Receipt this Period
500.00

500.00

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

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

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

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

FOR LINE NUMBER: PAGE 23 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Jan Colleen Cronquist
Mailing Address 989 Lombard Avenue
City St. Paul State MN Zip Code 55105
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-employed Occupation Exec. search
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 10 / 16 / 2009
Transaction ID: C2049429
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Cheryl Crowson
Mailing Address 328 Spring St
City Saint Paul State MN Zip Code 55102
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 11 / 03 / 2009
Transaction ID: C2061301
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Terry W Crowson
Mailing Address 328 Spring Street
City Saint Paul State MN Zip Code 55102
FEC ID number of contributing federal political committee. **C**
Name of Employer Health Partners Occupation Physician
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00
Date of Receipt 11 / 03 / 2009
Transaction ID: C2061300
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2050.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 155
(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Dwight Cummins

Mailing Address 612 S. 3rd St.

City State Zip Code
Stillwater MN 55082

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

Name of Employer Cummins Law Office Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

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

Transaction ID: C2070853

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Thomas Curran

Mailing Address 17752 Layton Path

City State Zip Code
Lakeville MN 55044

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

Name of Employer Self Occupation Bussiness Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: C2077503

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Jasper Daube

Mailing Address 1130 Sixth Street Sw

City State Zip Code
Rochester MN 55902

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

Name of Employer Mayo Foundation Occupation MD

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: C2069260

Amount of Each Receipt this Period
250.00

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: PAGE 25 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
John Bradford Davis
Mailing Address 4312 Pond View Drive
City State Zip Code
White Bear Lake MN 55110
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt: 12 / 30 / 2009
Transaction ID: C2077548
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mary Lee Lee Dayton
Mailing Address 540 Indian Mound St Apt 4B
City State Zip Code
Wayzata MN 55391-1884
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation retired
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2000.00
Date of Receipt: 12 / 31 / 2009
Transaction ID: C2077801
Amount of Each Receipt this Period: 1500.00

C. Full Name (Last, First, Middle Initial)
Tobin Dayton
Mailing Address 1895 Fox Ridge Rd
City State Zip Code
Long Lake MN 55356
FEC ID number of contributing federal political committee. **C**
Name of Employer JobDig Occupation Executive
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt: 12 / 29 / 2009
Transaction ID: C2077310
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 2250.00
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 26 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Charles M Denny

Mailing Address 3200 W. Calhoun Parkway
Apt. 501

City State Zip Code
Minneapolis MN 55416

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

Name of Employer N/A Occupation Self employed Retired

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

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

Transaction ID: C2076956

Amount of Each Receipt this Period
2400.00

4800.00

B. Full Name (Last, First, Middle Initial)
Paul Deputy

Mailing Address 315 Howtz Street

City State Zip Code
Duluth MN 55811

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

Name of Employer Univ. MN Duluth Occupation University Administrator-Dean

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

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

Transaction ID: C2077647

Amount of Each Receipt this Period
100.00

1100.00

C. Full Name (Last, First, Middle Initial)
David Detert

Mailing Address 717 S. Hubbard Ave

City State Zip Code
Litchfield MN 55355

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

Name of Employer Affiliated Community Medical Centers Occupation Physician

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

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

Transaction ID: C2061302

Amount of Each Receipt this Period
250.00

250.00

SUBTOTAL of Receipts This Page (optional) ► **2750.00**

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 27 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
James Dixon
Mailing Address 4700 Kent Street
City Shoreview State MN Zip Code 55126
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation Hospital Adm.
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Amount of Each Receipt this Period 250.00
Date of Receipt 12 / 10 / 2009
Transaction ID: C2072084

B. Full Name (Last, First, Middle Initial)
Janet Dolan
Mailing Address 2720 15th St NW
City New Brighton State MN Zip Code 55112
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Amount of Each Receipt this Period 500.00
Date of Receipt 11 / 07 / 2009
Transaction ID: C2062508

C. Full Name (Last, First, Middle Initial)
Jim Dolan
Mailing Address 222 S 9th St STE 2300
City Minneapolis State MN Zip Code 55402-3363
FEC ID number of contributing federal political committee. **C**
Name of Employer Dolan Media Occupation CEO
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Amount of Each Receipt this Period 2400.00
Date of Receipt 11 / 18 / 2009
Transaction ID: C2064836

SUBTOTAL of Receipts This Page (optional) ► **3150.00**
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
John Dowdle, M.D.

Mailing Address 332 Mississippi River Blvd S

City State Zip Code
Saint Paul MN 55105-1210

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

Name of Employer Summit Ortho Occupation Orthopedic Surgeon

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: C2073846

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Steve Duane

Mailing Address 1309 W. Minnehaha Pkwy

City State Zip Code
Minneapolis MN 55419

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

Name of Employer Park Nicollet Clinic Occupation Doctor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: C2072371

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Paul Durrant

Mailing Address 23324 295th Ave

City State Zip Code
Long Prairie MN 56347

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

Name of Employer UnitedHealth Group Occupation Software Architect

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: C2077546

Amount of Each Receipt this Period
500.00

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

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

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

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

FOR LINE NUMBER: PAGE 29 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
JEAN EBRAHIMI, M.D.
Mailing Address 3233 CHURCHILL CT

City State Zip Code
WOODBURY MN 55125

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

Name of Employer Occupation
Emergency Physicians Professional Asso ER Physician

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

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

Transaction ID: C2077233

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Nazie Eftekhari
Mailing Address 20 Merilane Ave

City State Zip Code
Edina MN 55436

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

Name of Employer Occupation
The Araz Group CEO

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

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

Transaction ID: C2064309

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Linda Ellwein
Mailing Address 5225 Grandview Sq.

City State Zip Code
Edina MN 55436

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

Name of Employer Occupation
retired retired health care

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

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

Transaction ID: C2054156

Amount of Each Receipt this Period
500.00

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

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

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

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

FOR LINE NUMBER: PAGE 30 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Michael Ellwein
Mailing Address 850 Old Crystal Bay Rd
City Wayzata State MN Zip Code 55391
FEC ID number of contributing federal political committee. **C**
Name of Employer Fredrickson & Byron Occupation Medical Technology Group
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00
Date of Receipt: 12 / 01 / 2009
Transaction ID: C2069252
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Carol Entwistle
Mailing Address 14371 Valley Creek Trl S
City Afton State MN Zip Code 55001-9330
FEC ID number of contributing federal political committee. **C**
Name of Employer Health East Occupation Physician
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
750.00
Date of Receipt: 11 / 16 / 2009
Transaction ID: C2064348
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Richard A. Erickson
Mailing Address 4875 E Lake Harriet Blvd
City Minneapolis State MN Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Holiday Companies & Dakota Jazz Club Occupation Owner
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
2400.00
Date of Receipt: 12 / 09 / 2009
Transaction ID: C2071766
Amount of Each Receipt this Period: 2400.00

SUBTOTAL of Receipts This Page (optional) ► 3900.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 155

(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Randall Ewald

Mailing Address 300 Laurel Road

City State Zip Code
Mahtomedi MN 55115

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

Name of Employer Occupation
Fairview Lakes Med Ctr surgeon

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

Date of Receipt

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

Transaction ID: C2068363

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
Philip Fabel, D.D.S.

Mailing Address 3426 Glenarden Ct

City State Zip Code
Arden Hills MN 55112

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

Name of Employer Occupation
Self Dentist

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

Date of Receipt

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

Transaction ID: C2077622

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Nancy Feldman

Mailing Address 4822 Folwell Drive

City State Zip Code
Minneapolis MN 55406

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

Name of Employer Occupation
UCare CEO

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 800.00

Date of Receipt

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

Transaction ID: C2075890

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 155

(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
John R Finnegan, Jr.

Mailing Address 844 Chippewa Av

City State Zip Code
St Paul MN 55107

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

Name of Employer Occupation
Univ of MN Dean, School of Public Health

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3000.00

Date of Receipt

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

Transaction ID: C2077754

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
Forrest Flint

Mailing Address 6837 Oaklawn Ave.

City State Zip Code
Edina MN 55435

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

Name of Employer Occupation
HealthPartners VP Dental Plan

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

Date of Receipt

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

Transaction ID: C2047776

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Patricia Fontaine Conboy

Mailing Address 1100 Angelo Dr

City State Zip Code
Golden Valley MN 55422

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

Name of Employer Occupation
MN Academy of Family Prac-
titioners President

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

Date of Receipt

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

Transaction ID: C2077464

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 155

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Flo Frances Francis

Mailing Address PO Box 50625

City State Zip Code
Minneapolis MN 55405

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

Name of Employer Occupation
Regis Corporation public relations

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

Date of Receipt

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

Transaction ID: C2075789

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Michael R. Francis

Mailing Address 2995 Watertown Road

City State Zip Code
Orono MN 55356

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

Name of Employer Occupation
Michael Francis Executive-Marketing

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

Date of Receipt

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

Transaction ID: C2077847

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Fred Raundal Friswold

Mailing Address 5925 Tamarac Ave

City State Zip Code
Edina MN 55436

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

Name of Employer Occupation
Tonka Equipment Company President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

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

Transaction ID: C2076996

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ▶

1800.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 155

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Judy Garrard

Mailing Address 1234 W Minnehaha Pkwy

City State Zip Code
Minneapolis MN 55419

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

Name of Employer Occupation
Univ of Minnesota Professor

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

Date of Receipt

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

Transaction ID: C2053010

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
Beverly SUE Geber

Mailing Address 15100 Square Lake Trl N

City State Zip Code
Stillwater MN 55082

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

Name of Employer Occupation
Aspen Medical Group self/writer

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

Date of Receipt

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

Transaction ID: C2063844

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Beverly SUE Geber

Mailing Address 15100 Square Lake Trl N

City State Zip Code
Stillwater MN 55082

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

Name of Employer Occupation
Aspen Medical Group self/writer

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

Date of Receipt

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

Transaction ID: C2072428

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional) ▶

950.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mary Gillstrom
Mailing Address 1341 15th St

City Houlton State WI Zip Code 54082-2208

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

Name of Employer Andersen Foundation Occupation Director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 12 / 31 / 2009
Transaction ID: C2077819
 Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Brien Godfrey
Mailing Address 256 Spring St Unit 219

City St Paul State MN Zip Code 55102

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

Name of Employer self Occupation physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 12 / 01 / 2009
Transaction ID: C2069490
 Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Joanne Johnson Goertz
Mailing Address 1037 Indian Trl

City Afton State MN Zip Code 55001

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

Name of Employer Self Employed Occupation Volunteer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 12 / 31 / 2009
Transaction ID: C2080090
 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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

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

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

FOR LINE NUMBER: PAGE 36 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Patti Goldberg

Mailing Address 5632 Woodcrest Dr

City State Zip Code
Minneapolis MN 55424

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

Name of Employer Occupation
Goldberg Bonding Company Insurance

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

Date of Receipt
MM / DD / YYYY
11 / 30 / 2009

Transaction ID: C2069078

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Bobby Griffin

Mailing Address 1326 Spring Valley Road

City State Zip Code
Golden Valley MN 55422

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt
MM / DD / YYYY
12 / 01 / 2009

Transaction ID: C2069501

Amount of Each Receipt this Period
2400.00

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

Mailing Address 301 Laser Trail

City State Zip Code
Redwood Falls MN 56283

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

Name of Employer Occupation
ACMC physician

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

Date of Receipt
MM / DD / YYYY
10 / 01 / 2009

Transaction ID: C2043208

Amount of Each Receipt this Period
500.00

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

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

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

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

FOR LINE NUMBER: PAGE 37 / 155

(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Tom A Gump

Mailing Address 4703 Sunnyside Rd.

City State Zip Code
Edina MN 55424

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

Name of Employer Self Occupation
Real Estate Development

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

Date of Receipt

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

Transaction ID: C2061058

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
Tom Gunkel

Mailing Address 4949 Woodhurst Lane

City State Zip Code
Minnetonka MN 55345

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

Name of Employer M. A. Mortenson Company Occupation
President and Chief Executive Officer

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2400.00

Date of Receipt

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

Transaction ID: C2077965

Amount of Each Receipt this Period

2400.00

C.

Full Name (Last, First, Middle Initial)
Susan Hadley

Mailing Address 15297 Edgewater Cir NE

City State Zip Code
Prior Lake MN 55372

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

Name of Employer Fairview Occupation
Health Care Worker

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

Date of Receipt

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

Transaction ID: C2071384

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

2900.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 38 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Robert S Hagstrom
Mailing Address 8441 Kimbro Ave N
City Stillwater State MN Zip Code 55082-9371
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00
Date of Receipt 12 / 18 / 2009
Transaction ID: C2075966
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Susan Hagstrom
Mailing Address 176 N Mississippi River Blvd
City Saint Paul State MN Zip Code 55104
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2250.00
Date of Receipt 12 / 04 / 2009
Transaction ID: C2070453
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Roger L Hale
Mailing Address 41 W Island Ave
City Minneapolis State MN Zip Code 55401
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00
Date of Receipt 12 / 27 / 2009
Transaction ID: C2076926
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 550.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 39 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Jan Hallstrom
Mailing Address 14189 Ozark Ave N
City Stillwater State MN Zip Code 55082
FEC ID number of contributing federal political committee. **C**
Name of Employer L & H Enterprises Occupation Owner
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 12 / 14 / 2009
Transaction ID: C2072435
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Lorie Halvorson
Mailing Address 68 Prospect Ave
City Sausalito State CA Zip Code 94965
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Homemaker
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 10 / 18 / 2009
Transaction ID: C2049866
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Robert BENNETT Harrigan
Mailing Address 221 Ashley Road
City Hopkins State MN Zip Code 55343
FEC ID number of contributing federal political committee. **C**
Name of Employer Sit Investment Associates Occupation Sales
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 12 / 13 / 2009
Transaction ID: C2072374
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2250.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Paul Harris

Mailing Address 346 6th St. S

City State Zip Code
Bayport MN 55003

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

Name of Employer Occupation
Easter Lutheran Church Pastor

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

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

Transaction ID: C2068285

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Greg Hart

Mailing Address 12651 Shannon Pkwy

City State Zip Code
Rosemount MN 55068

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

Name of Employer Occupation
Larson Allen Consulting Consultant

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

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

Transaction ID: C2077232

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Guilford G Hartley

Mailing Address 5 Sparrow Lane

City State Zip Code
North Oaks MN 55127

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

Name of Employer Occupation
Hennepin Faculty Associates physician

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

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

Transaction ID: C2066724

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

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

Mailing Address 2625 Via Ramon

City Palos Verdes Estat State CA Zip Code 90274

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

Name of Employer U.S. Bancorp Occupation Head of Consumer Banking Division

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 11 / 13 / 2009
Transaction ID: C2063845
 Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Mary Hauser

Mailing Address 616 Hall Ave

City White Bear Lake State MN Zip Code 55110

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

Name of Employer N/A Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 12 / 04 / 2009
Transaction ID: C2070468
 Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Thane D Hawkins

Mailing Address 126 Dellwood Ave

City Dellwood State MN Zip Code 55110

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

Name of Employer Polar Chevrolet Occupation Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 12 / 29 / 2009
Transaction ID: C2077238
 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1750.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
David Heffernan

Mailing Address 5442 Meister Rd. N.E.

City State Zip Code
Minneapolis MN 55432

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

Name of Employer Occupation
Squid Ink Manufacturing Illustrator

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

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

Transaction ID: C2051498

Amount of Each Receipt this Period
250.00

250.00

B.

Full Name (Last, First, Middle Initial)
Bruce E Hendry

Mailing Address

City State Zip Code
Minneapolis MN 55401

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

Name of Employer Occupation
self retired

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

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

Transaction ID: C2076673

Amount of Each Receipt this Period
2400.00

2400.00

C.

Full Name (Last, First, Middle Initial)
Randall Herman

Mailing Address 5200 Oxford Street

City State Zip Code
Shoreview MN 55126

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

Name of Employer Occupation
Pone Grove Mgmt Executive

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

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

Transaction ID: C2049393

Amount of Each Receipt this Period
500.00

500.00

SUBTOTAL of Receipts This Page (optional) ► **3150.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 155

(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Gerry Herringer

Mailing Address 1731 Innsbruck Pkwy

City State Zip Code
Columbia Heights MN 55421

FEC ID number of contributing federal political committee. C

Name of Employer
Self Employed

Occupation
Real Estate Developer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y
12 / 08 / 2009

Transaction ID: C2071272

Amount of Each Receipt this Period
250.00

250.00

B.

Full Name (Last, First, Middle Initial)
Rick Hilger

Mailing Address 1260 Eleanor Ave

City State Zip Code
Saint Paul MN 55116

FEC ID number of contributing federal political committee. C

Name of Employer
Health Partners

Occupation
MD

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y
12 / 30 / 2009

Transaction ID: C2077612

Amount of Each Receipt this Period
250.00

250.00

C.

Full Name (Last, First, Middle Initial)
Marcia E. Hillestad

Mailing Address 15760 Diamond Way

City State Zip Code
Apple Valley MN 55124

FEC ID number of contributing federal political committee. C

Name of Employer
Cove Point Lodge

Occupation
Director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y
11 / 21 / 2009

Transaction ID: C2066630

Amount of Each Receipt this Period
500.00

500.00

SUBTOTAL of Receipts This Page (optional) 1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 155

(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Charlie JOHN Hipp

Mailing Address 1217 Indian Trl S

City State Zip Code
Afton MN 55001-9705

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

Name of Employer Occupation
Stillwater Medical Group & Century Com Physican & Teacher

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

Date of Receipt

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

Transaction ID: C2064163

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Andrea M. Hjelm

Mailing Address 2412 Lake Of Isles Pkwy W

City State Zip Code
Minneapolis MN 55405

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

Name of Employer Occupation
Moore Talent Agency President

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

Date of Receipt

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

Transaction ID: C2070625

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
Christine A Hlavacek

Mailing Address 1010 Stagecoach Tr

City State Zip Code
Afton MN 55001

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

Name of Employer Occupation
Homemaker Homemaker

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

Date of Receipt

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

Transaction ID: C2064165

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ▶

1200.00

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

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

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

FOR LINE NUMBER: PAGE 45 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Robert H. Hoffman

Mailing Address 821 5th Ave NE

City State Zip Code
Waseca MN 56093

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

Name of Employer Occupation
Minnesota State Colleges and Universit Board Chair

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

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

Transaction ID: C2064389

Amount of Each Receipt this Period
250.00

250.00

B. Full Name (Last, First, Middle Initial)
Libby Horner

Mailing Address 7612 Stonewood Ct.

City State Zip Code
Edina MN 55439

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

Name of Employer Occupation
none homemaker

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

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

Transaction ID: C2062573

Amount of Each Receipt this Period
1000.00

1000.00

C. Full Name (Last, First, Middle Initial)
Andrew Horstman

Mailing Address 2404 Cromwell Drive

City State Zip Code
Minneapolis MN 55410

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

Name of Employer Occupation
Medtronic, Inc. Attorney

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

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

Transaction ID: C2068370

Amount of Each Receipt this Period
250.00

250.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 155
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Richard Houck

Mailing Address 4517 Orchard Ave N

City Robbinsdale State MN Zip Code 55422

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

Name of Employer Houck Machine Company Occupation Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 12 / 31 / 2009
Transaction ID: C2077869
Amount of Each Receipt this Period 1000.00

B.

Full Name (Last, First, Middle Initial)
Michael Howe

Mailing Address 215 10th Avenue South Suite 912

City Minneapolis State MN Zip Code 55415

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

Name of Employer Self employed Occupation Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 12 / 28 / 2009
Transaction ID: C2076972
Amount of Each Receipt this Period 2400.00

C.

Full Name (Last, First, Middle Initial)
Christie Hughes

Mailing Address 5901 Zenith Ave South

City Edina State MN Zip Code 55410

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

Name of Employer Tufford - Hughes & Associates Occupation Financial Advisor/Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 11 / 24 / 2009
Transaction ID: C2068287
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► **3650.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) Maclay Hyde		Date of Receipt
	Mailing Address 532 Janalyn Circle		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 0 3 / 2 0 0 9
	City	State	Zip Code
	Minneapolis	MN	55416
	FEC ID number of contributing federal political committee. C		Transaction ID: C2070080
Name of Employer Real Estate Recycling		Occupation Real Estate	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00

B.	Full Name (Last, First, Middle Initial) Gretchen Ibele, M.D.		Date of Receipt
	Mailing Address 1792 Hillcrest Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 9
	City	State	Zip Code
	Saint Paul	MN	55116
	FEC ID number of contributing federal political committee. C		Transaction ID: C2079094
Name of Employer HealthPartners - Riverside		Occupation Information Requested	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00

C.	Full Name (Last, First, Middle Initial) Thomas H. Inglis		Date of Receipt
	Mailing Address 650 Lakewood Dr SW		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 1 5 / 2 0 0 9
	City	State	Zip Code
	Hutchinson	MN	55350
	FEC ID number of contributing federal political committee. C		Transaction ID: C2072825
Name of Employer Self Employed		Occupation Orthodontist	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 155

(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Linda Christine Ireland

Mailing Address 10847 Third Street Place North

City State Zip Code
Lake Elmo MN 55042

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

Name of Employer Aveus Occupation Owner

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

Date of Receipt

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

Transaction ID: C2068512

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
Patrick W Irvine

Mailing Address 510 Grand Avenue #204

City State Zip Code
Saint Paul MN 55102

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

Name of Employer Patrick Irvine Occupation self

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

Date of Receipt

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

Transaction ID: C2043081

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Donald MOOR Jacobs

Mailing Address 17651 Bearpath Trail

City State Zip Code
Eden Prairie MN 55347

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

Name of Employer Hennepin Faculty Associates Occupation CEO and Chairman of the Board

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

Date of Receipt

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

Transaction ID: C2063569

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 49 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Maynard E Jacobson

Mailing Address 3 Angell Court

City State Zip Code
Sunfish Lake MN 55118

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

Name of Employer None Occupation Retired Professor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2061092

Amount of Each Receipt this Period
250.00

250.00

B. Full Name (Last, First, Middle Initial)
Don Janes

Mailing Address 5 Doral Road

City State Zip Code
Dellwod MN 55110

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2072171

Amount of Each Receipt this Period
250.00

250.00

C. Full Name (Last, First, Middle Initial)
Timothy E Johns

Mailing Address 5615 Poola St

City State Zip Code
Honolulu HI 96821-1564

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

Name of Employer bishop museum Occupation museum director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2077733

Amount of Each Receipt this Period
500.00

500.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
David W. Johnson, M.D.
Mailing Address 308 River Park Drive

City State Zip Code
Mankato MN 56001

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

Name of Employer Occupation
ISJ/Mayo Health System Radiologist

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

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

Transaction ID: C2049732

Amount of Each Receipt this Period
1000.00

Election Cycle-to-Date ▼ 1000.00

B. Full Name (Last, First, Middle Initial)
Josie Johnson
Mailing Address 400 Groveland Ave. #2007

City State Zip Code
MINNEAPOLIS MN 55403

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

Name of Employer Occupation
St. Peter Claver Catholic School Principal

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

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

Transaction ID: C2079070

Amount of Each Receipt this Period
100.00

Election Cycle-to-Date ▼ 500.00

C. Full Name (Last, First, Middle Initial)
Judy Johnson
Mailing Address 13495 51st St. N

City State Zip Code
Stillwater MN 55082

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

Name of Employer Occupation
Allina Nurse

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

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

Transaction ID: C2055418

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date ▼ 500.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 / 155
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) Rodger Johnson		Date of Receipt
	Mailing Address 4731 Bouleau Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 2 1 / 2 0 0 9
	City	State	Zip Code
	St. Paul	MN	55110
	FEC ID number of contributing federal political committee. C		Transaction ID: C2076287
Name of Employer N/A		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00

B.	Full Name (Last, First, Middle Initial) Scott W Johnson		Date of Receipt
	Mailing Address 3209 Galleria #1402		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 1 8 / 2 0 0 9
	City	State	Zip Code
	Edina	MN	55439
	FEC ID number of contributing federal political committee. C		Transaction ID: C2075959
Name of Employer N/A		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00

C.	Full Name (Last, First, Middle Initial) Susan Jean Johnson		Date of Receipt
	Mailing Address 646 Ferndale Rd W		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 0 / 2 0 0 9
	City	State	Zip Code
	Wayzata	MN	
	FEC ID number of contributing federal political committee. C		Transaction ID: C2077558
Name of Employer Self Employed		Occupation Gallery Owner	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1750.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

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

Mailing Address 709 8th Street South

City Moorhead State MN Zip Code 56560

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

Name of Employer Concordia College Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 12 / 31 / 2009
Transaction ID: C2079058
 Amount of Each Receipt this Period: 300.00

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

Mailing Address 442 S Mississippi River Blvd.

City St. Paul State MN Zip Code 55105

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

Name of Employer none listed Occupation none listed

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 12 / 23 / 2009
Transaction ID: C2076672
 Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Geri Joseph

Mailing Address 1201 Yale Place #502

City Mpls State MN Zip Code 55403

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

Name of Employer none Occupation retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 12 / 31 / 2009
Transaction ID: C2077851
 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: PAGE 53 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
peter joseph, M.D.
Mailing Address 53 summit rd
City san anselmo State CA Zip Code 94960
FEC ID number of contributing federal political committee. **C**
Name of Employer emg Occupation physician
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt 12 / 20 / 2009
Transaction ID: C2076158
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Christine Judge
Mailing Address 8089 Galway Road
City Woodbury State MN Zip Code 55125
FEC ID number of contributing federal political committee. **C**
Name of Employer UnitedHealth Group Occupation Operations Director
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 10 / 12 / 2009
Transaction ID: C2047909
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Christine Judge
Mailing Address 8089 Galway Road
City Woodbury State MN Zip Code 55125
FEC ID number of contributing federal political committee. **C**
Name of Employer UnitedHealth Group Occupation Operations Director
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 12 / 19 / 2009
Transaction ID: C2076072
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Janet Kauls

Mailing Address 13812 High Drive

City State Zip Code
Burnsville MN 55337

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

Name of Employer none Occupation retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: C2079089

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Jeremiah Kearney

Mailing Address 5420 Woodcrest

City State Zip Code
Edina MN 55424

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

Name of Employer Fabyanske law firm Occupation attoreny

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

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

Transaction ID: C2059661

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Jeremiah Kearney

Mailing Address 5420 Woodcrest

City State Zip Code
Edina MN 55424

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

Name of Employer Fabyanske law firm Occupation attoreny

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

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

Transaction ID: C2077417

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **600.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Gale Kerns

Mailing Address 740 S Lake Ave

City Duluth State MN Zip Code 55802

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

Name of Employer Self Employed Occupation Physician -Cardiology

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt 12 / 14 / 2009
Transaction ID: C2072433
 Amount of Each Receipt this Period 750.00

B. Full Name (Last, First, Middle Initial)
Susan Ford Kettering

Mailing Address 2018 Queen Ave. So.

City Minneapolis State MN Zip Code 55405

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

Name of Employer none Occupation homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 10 / 17 / 2009
Transaction ID: C2049802
 Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Judy Y Kirk

Mailing Address 7137 Arbor Glen Dr

City Eden Prairie State MN Zip Code 55346

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

Name of Employer University of Minnesota Foundation Occupation Vice President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt 11 / 21 / 2009
Transaction ID: C2066634
 Amount of Each Receipt this Period 100.00

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: PAGE 56 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Thomas J Klas
Mailing Address 496 Montrose Lane
City Saint Paul State MN Zip Code 55166
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Tapemark Co.
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 350.00
Date of Receipt 12 / 28 / 2009
Transaction ID: C2077042
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Susan Klevan
Mailing Address 1142 Summit Ave
City Saint Paul State MN Zip Code 55105
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Homemaker
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 250.00
Date of Receipt 11 / 10 / 2009
Transaction ID: C2063134
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Leslie Anne Kopietz
Mailing Address 2497 Arcade Street
City Little Canada State MN Zip Code 55109
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthPartners Occupation MD
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 1100.00
Date of Receipt 12 / 31 / 2009
Transaction ID: C2077943
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 600.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 57 / 155

(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

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

Mailing Address 571 Otis Ave

City State Zip Code
Saint Paul MN 55104

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

Name of Employer HealthPartners Occupation Cardiologist

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

Date of Receipt

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

Transaction ID: C2063098

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Heidi Krueger

Mailing Address 1010 Hesli Hill Court

City State Zip Code
Shoreview MN 55126

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

Name of Employer Allina Health System Occupation District Director

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

Date of Receipt

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

Transaction ID: C2075868

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Margaret W Leppik

Mailing Address 7500 Western Ave

City State Zip Code
Golden Valley MN 55427-4849

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

Name of Employer Metropolitan Council Occupation Council member

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

Date of Receipt

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

Transaction ID: C2077840

Amount of Each Receipt this Period
50.00

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: PAGE 58 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

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

Mailing Address 1075 Douglas Rd

City State Zip Code
Saint Paul MN 55118

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

Name of Employer N/A Occupation Retired cardiologist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2077241

Amount of Each Receipt this Period
500.00

500.00

B. Full Name (Last, First, Middle Initial)
Elizabeth Lincoln

Mailing Address 3325 Zircon Lane North

City State Zip Code
Plymouth MN 55447

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

Name of Employer MMIHC Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2047585

Amount of Each Receipt this Period
1500.00

1500.00

C. Full Name (Last, First, Middle Initial)
Daniel Loritz

Mailing Address 8810 42nd St N

City State Zip Code
Lake Elmo MN 55042

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

Name of Employer Hamline University Occupation Faculty

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2077816

Amount of Each Receipt this Period
250.00

250.00

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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 59 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Russell Luepker

Mailing Address 4108 Edmund Blvd

City State Zip Code
Minneapolis MN 55406

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

Name of Employer Occupation
University of Minnesota Professor

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

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

Transaction ID: C2063846

Amount of Each Receipt this Period
1000.00

Election Cycle-to-Date Amount: 1000.00

B.

Full Name (Last, First, Middle Initial)
Reed King Mackenzie

Mailing Address 3 Birdie Lane

City State Zip Code
Chaska MN 55318

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

Name of Employer Occupation
Mackenzie & Dornik lawyer

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

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

Transaction ID: C2077794

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date Amount: 500.00

C.

Full Name (Last, First, Middle Initial)
Jan K Malcolm

Mailing Address 3819 Zenith Ave So

City State Zip Code
Minneapolis MN 55410

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

Name of Employer Occupation
Courage Center administration

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

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

Transaction ID: C2077853

Amount of Each Receipt this Period
250.00

Election Cycle-to-Date Amount: 250.00

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

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

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

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

FOR LINE NUMBER: PAGE 60 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Peter Maritz
Mailing Address 4511 E LAKE HARRIET BLVD
City MINNEAPOLIS State MN Zip Code 55419
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Consultant
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 11 / 06 / 2009
Transaction ID: C2062215
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Michael Marmor, M.D.
Mailing Address 649 Mirada Ave
City Stanford State CA Zip Code 94305
FEC ID number of contributing federal political committee. **C**
Name of Employer Stanford Univ Occupation physician
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 12 / 31 / 2009
Transaction ID: C2079095
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Jennifer Martin
Mailing Address 16110 36th Place N
City Minneapolis State MN Zip Code 55446
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt 12 / 27 / 2009
Transaction ID: C2076916
Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) ► 1550.00
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 61 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
W Edward McConaghay

Mailing Address 2406 Thomas Lane

City State Zip Code
Minneapolis MN 55405

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

Name of Employer PhotoBook Press Occupation Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2077776

Amount of Each Receipt this Period
1000.00

Election Cycle-to-Date ▼ 1000.00

B. Full Name (Last, First, Middle Initial)
William McLaughlin

Mailing Address 2350 Lake of the Isles Pkwy W

City State Zip Code
Minneapolis MN 55405

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

Name of Employer Select Comfort Corporation Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2069627

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date ▼ 500.00

C. Full Name (Last, First, Middle Initial)
Roberta Megard

Mailing Address 1439 Hythe Street

City State Zip Code
Saint Paul MN 55108

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

Name of Employer None Occupation Not Employed

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2070851

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date ▼ 500.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Harold Miller

Mailing Address 320 Ft. Duquesne Blvd.

City State Zip Code
Pittsburgh PA 15222

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

Name of Employer Occupation
Future Strategies, LLC President

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

Date of Receipt

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

Transaction ID: C2062373

Amount of Each Receipt this Period
250.00

250.00

B. Full Name (Last, First, Middle Initial)
Herbert Mohring

Mailing Address 1201 Yale Place

City State Zip Code
Minneapolis MN 55403

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

Name of Employer Occupation
N/A Retired

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

Date of Receipt

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

Transaction ID: C2077720

Amount of Each Receipt this Period
200.00

700.00

C. Full Name (Last, First, Middle Initial)
Bjorn K. Monson

Mailing Address 22 Ludlow Avenue

City State Zip Code
Saint Paul MN 55108

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

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

Transaction ID: C2077427

Amount of Each Receipt this Period
500.00

1500.00

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: PAGE 63 / 155
(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

<p>A. Full Name (Last, First, Middle Initial) Jack Morrison</p> <p>Mailing Address 234 Edgewood Ave</p> <p>City State Zip Code Wayzata MN 55391</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Goldner Hawn Johnson & Morrison Occupation: Director</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 9 / 2 0 0 9</p> <p>Transaction ID: C2071773</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Amount of Each Receipt this Period 1000.00</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) Mauritz A. Mortenson, Jr.</p> <p>Mailing Address 700 Meadow Lane N</p> <p>City State Zip Code Minneapolis MN 55422</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: M.A. Mortenson Company Occupation: Chairman</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 9 / 2 0 0 9</p> <p>Transaction ID: C2071768</p> <p>Amount of Each Receipt this Period 2400.00</p> <p>Amount of Each Receipt this Period 2400.00</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Mauritz A. Mortenson, Jr.</p> <p>Mailing Address 700 Meadow Lane N</p> <p>City State Zip Code Minneapolis MN 55422</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: M.A. Mortenson Company Occupation: Chairman</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 9 / 2 0 0 9</p> <p>Transaction ID: C2071770</p> <p>Amount of Each Receipt this Period 2400.00</p> <p>Amount of Each Receipt this Period 2400.00</p>
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<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>5800.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

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

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

FOR LINE NUMBER: PAGE 64 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Thomas V Moss

Mailing Address 175 Woodlawn Avenue

City State Zip Code
St. Paul MN 55105

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

Name of Employer Public Strategies Group Occupation Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

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

Transaction ID: C2048006

Amount of Each Receipt this Period
1200.00

B. Full Name (Last, First, Middle Initial)
Michael Nation

Mailing Address 2115 Princeton Ave

City State Zip Code
Saint Paul MN 55105

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

Name of Employer Central Pediatrics Occupation Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: C2068284

Amount of Each Receipt this Period
250.00

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

Mailing Address 2420 Russell Ave S

City State Zip Code
Minneapolis MN 55405

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

Name of Employer Allina Medical Group-Highland Park Occupation Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

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

Transaction ID: C2071820

Amount of Each Receipt this Period
250.00

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

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

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

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

FOR LINE NUMBER: PAGE 65 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
J. Daniel Daniel Nelson, M.D.
Mailing Address 7023 Viking Bvd NE
City State Zip Code
Wyoming MN 55092
FEC ID number of contributing federal political committee. **C**
Name of Employer HealthPartners Occupation Physician
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 9
Transaction ID: C2070616
Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
James Nelson
Mailing Address 7790 Lochmere Terr
City State Zip Code
Edina MN 55439
FEC ID number of contributing federal political committee. **C**
Name of Employer Eberhardt Advisory LLC Occupation Real Estate
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2000.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 9
Transaction ID: C2077535
Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Stephen N Nelson
Mailing Address 1502 8th Street South
City State Zip Code
Fargo ND 58103
FEC ID number of contributing federal political committee. **C**
Name of Employer MeritCare Occupation Neonatal-Perinatal Medicine
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 400.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 3 / 2 0 0 9
Transaction ID: C2063997
Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► 2900.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 66 / 155

(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Richard Newmark

Mailing Address 810 Woodduck Drive

City State Zip Code
Woodbury MN 55125

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

Name of Employer Retired-3M Occupation Not Employed

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

Date of Receipt

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

Transaction ID: C2070474

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Richard Newmark

Mailing Address 810 Woodduck Drive

City State Zip Code
Woodbury MN 55125

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

Name of Employer Retired-3M Occupation Not Employed

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

Date of Receipt

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

Transaction ID: C2072436

Amount of Each Receipt this Period

700.00

C.

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

Mailing Address 4848 Northrop Dr

City State Zip Code
Minneapolis MN 55406

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

Name of Employer U of M Occupation VP University Services

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

Date of Receipt

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

Transaction ID: C2079075

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1300.00

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 67 / 155

(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Mike M O'Fallon

Mailing Address 1239 NE 19th Ave.

City State Zip Code
Rochester MN 55906

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

Name of Employer Occupation
none none

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

Date of Receipt

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

Transaction ID: C2069216

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Stephen Oesterle

Mailing Address 2424 W Lake of the Isles Pkwy

City State Zip Code
Minneapolis MN 55405-2331

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

Name of Employer Occupation
Medtronic Sr Executive

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

Date of Receipt

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

Transaction ID: C2064799

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Kathleen Ogle

Mailing Address 10551 Morgan Ave S

City State Zip Code
Bloomington MN 55431

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

Name of Employer Occupation
Hennepin Faculty Assoc Physician

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

Date of Receipt

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

Transaction ID: C2076729

Amount of Each Receipt this Period
250.00

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Julie Ollila
Mailing Address 16 Elmwood PI W
City Minneapolis State MN Zip Code 55419
FEC ID number of contributing federal political committee. **C**
Name of Employer Allina Occupation MD
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Amount of Each Receipt this Period 1000.00
Transaction ID: C2071282

B. Full Name (Last, First, Middle Initial)
Alison H Page
Mailing Address 430 Crescent Street
City River Falls State WI Zip Code 54022
FEC ID number of contributing federal political committee. **C**
Name of Employer Baldwin Area Medical Center Occupation Administrator / CEO
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Amount of Each Receipt this Period 200.00
Transaction ID: C2071294

C. Full Name (Last, First, Middle Initial)
Anita MARIE Pampusch
Mailing Address 161 Stonebridge Rd.
City Lilydale State MN Zip Code 55118
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Foundation President
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Amount of Each Receipt this Period 1000.00
Transaction ID: C2061951

SUBTOTAL of Receipts This Page (optional) ► 2200.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 69 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

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

Mailing Address 202 West Lincoln

City State Zip Code
Luverne MN 56156

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

Name of Employer Self Occupation Dentist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: C2076930

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Eve Parker

Mailing Address 2500 Seabury Avenue

City State Zip Code
Minneapolis MN 55406

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

Name of Employer Marcy Open School Occupation Middle School Coordinator

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: C2062584

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Joanne Patterson

Mailing Address 4218 Sunnyside Road

City State Zip Code
Minneapolis MN 55424

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

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

Transaction ID: C2063500

Amount of Each Receipt this Period
300.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
David E. Pautz

Mailing Address 6313 Westwood Court

City Edina State MN Zip Code 55436

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

Name of Employer BCBSMN Occupation Medical Director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 11 / 19 / 2009
Transaction ID: C2065224
 Amount of Each Receipt this Period 250.00

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

Mailing Address 4453 Aldrich Ave S

City Minneapolis State MN Zip Code 55419

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

Name of Employer Self Employed Occupation Health Care Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt 12 / 29 / 2009
Transaction ID: C2077237
 Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Marybeth Peller

Mailing Address 763 220th Avenue

City Somerset State WI Zip Code 54025

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

Name of Employer Parks & Trails Council of MN Occupation Office Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 11 / 02 / 2009
Transaction ID: C2061056
 Amount of Each Receipt this Period 200.00

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

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

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

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

FOR LINE NUMBER: PAGE 71 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Lawrence Perlman

Mailing Address P.O. Box 2008

City State Zip Code
Wilson WY 83014

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

Name of Employer none Occupation none

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2150.00

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

Transaction ID: C2079061

Amount of Each Receipt this Period
1900.00

B. Full Name (Last, First, Middle Initial)
William E. Petersen

Mailing Address 3430 List Pl Apt 1501

City State Zip Code
Minneapolis MN 55416

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

Name of Employer N/A Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: C2061326

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Maren Peterson

Mailing Address 4533 Saddlewood Dr

City State Zip Code
Minnetonka MN 55345

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

Name of Employer Park Nicollet Occupation Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: C2077428

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **2400.00**

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 72 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
David Plut

Mailing Address 4331 Fremont Ave S

City State Zip Code
Minneapolis MN 55409-1720

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

Name of Employer Occupation
Northwest Anesthesia Physician

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

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

Transaction ID: C2065215

Amount of Each Receipt this Period
250.00

250.00

B.

Full Name (Last, First, Middle Initial)
Shailendra Prasad

Mailing Address 570 Lake Ridge Drive

City State Zip Code
Shoreview MN 55126

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

Name of Employer Occupation
University of Minnesota Physician

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

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

Transaction ID: C2077683

Amount of Each Receipt this Period
250.00

500.00

C.

Full Name (Last, First, Middle Initial)
Paul C. Pribbenow

Mailing Address 2848 West River Pkwy

City State Zip Code
Minneapolis MN 55406

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

Name of Employer Occupation
Augsburg College President

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

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

Transaction ID: C2077854

Amount of Each Receipt this Period
500.00

500.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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 73 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
J. David Prince

Mailing Address 5165 Linden Trl N

City State Zip Code
Lake Elmo MN 55042

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

Name of Employer Occupation
William Mitchell College of Law Professor

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

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

Transaction ID: C2076904

Amount of Each Receipt this Period
250.00

250.00

B. Full Name (Last, First, Middle Initial)
Paul Quie, M.D.

Mailing Address 2154 Commonwealth Ave

City State Zip Code
Saint Paul MN 55108

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

Name of Employer Occupation
U of M Physician

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

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

Transaction ID: C2072247

Amount of Each Receipt this Period
250.00

250.00

C. Full Name (Last, First, Middle Initial)
Paul Quiin

Mailing Address 9991 Arcola Court

City State Zip Code
Stillwater MN 55082

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

Name of Employer Occupation
Retired Retired

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

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

Transaction ID: C2068280

Amount of Each Receipt this Period
250.00

250.00

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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 74 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Lois M Rand

Mailing Address 910 Cannon Valley Dr
Apt 1218

City Northfield State MN Zip Code 55057

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

Name of Employer N/A Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 12 / 16 / 2009
Transaction ID: C2073849
 Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Gerald M Reed

Mailing Address 2050 Acacia Drive

City Mendota Heights State MN Zip Code 55120

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 12 / 27 / 2009
Transaction ID: C2076907
 Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Hazel Reinhardt

Mailing Address 5116 Abercrombie Dr

City Edina State MN Zip Code 55439

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

Name of Employer Self Employed Occupation Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 12 / 27 / 2009
Transaction ID: C2076918
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Halie Richards

Mailing Address 6804 Dakota Trl

City State Zip Code
Minneapolis MN 55439

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Blue Cross Blue Shield VP

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

Date of Receipt

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

Transaction ID: C2077542

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Kirk Rodysill

Mailing Address 827 Fox Pointe Ln

City State Zip Code
Rochester MN 55902

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Mayo Clinic Physician - Internist/ Geriatrics

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

Date of Receipt

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

Transaction ID: C2072172

Amount of Each Receipt this Period
500.00

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

Mailing Address 1558 Park Circle

City State Zip Code
Mendota Heights MN 55118

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
self Physician

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

Date of Receipt

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

Transaction ID: C2070676

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) 1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

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

Mailing Address 4171 Fallow St.

City State Zip Code
West Bloomfield MI 48323

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Blue Cross Blue Shield of MI Principal

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

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

Transaction ID: C2076159

Amount of Each Receipt this Period
250.00

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

Mailing Address 3151 Dean Court

City State Zip Code
Minneapolis MN 55416

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
MN Smoke Free Coalition Research

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

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

Transaction ID: C2063111

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Michael D Scandrett

Mailing Address 4129 Drew Ave South

City State Zip Code
Minneapolis MN 55410

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Halleland Lewis Director of Health Policy

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

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

Transaction ID: C2061049

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) 850.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 77 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

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

Mailing Address 4864 Woodhurst Ln

City State Zip Code
Minnetonka MN 55345

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

Name of Employer L&L Management Services Inc. Occupation President

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

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

Transaction ID: C2076161

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mary Schertler

Mailing Address 2800 No Hamline Ave #226

City State Zip Code
Roseville MN 55113

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

Name of Employer N/A Occupation Retired

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

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

Transaction ID: C2076922

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Denise N. Schlesinger

Mailing Address 3074 Avon St. N

City State Zip Code
Roseville MN 55113

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

Name of Employer N/A Occupation Homemaker

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

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

Transaction ID: C2069085

Amount of Each Receipt this Period
500.00

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

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

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

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

FOR LINE NUMBER: PAGE 78 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Michael D. Schoenleber

Mailing Address 1225 Josephine Rd

City State Zip Code
Roseville MN 55113

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

Name of Employer HealthPartners Occupation physician, Arden Hills Location.

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2059759

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date ▼ 500.00

B. Full Name (Last, First, Middle Initial)
Tim Sheehan

Mailing Address 7881 North Shore Trail N

City State Zip Code
Forest Lake MN 55025

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

Name of Employer Hazelden Occupation Psychologist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2051323

Amount of Each Receipt this Period
1200.00

Election Cycle-to-Date ▼ 1200.00

C. Full Name (Last, First, Middle Initial)
Kathryn Sikkink

Mailing Address 1813 Girard Ave S

City State Zip Code
Minneapolis MN 55403-2976

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

Name of Employer U of MN Occupation Regents/Professor- Political Science

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2062576

Amount of Each Receipt this Period
1000.00

Election Cycle-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional) ► **2700.00**

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 79 / 155
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) Anne Simonson		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 0 9		
	Mailing Address 1065 Edgewood Hill Rd		Transaction ID: C2077574		
	City Wayzata	State MN	Zip Code 55391	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer N/A		Occupation Retired		

Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00
---	------------------------------------

B.	Full Name (Last, First, Middle Initial) Frank L Sims		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 7 / 2 0 0 9		
	Mailing Address 1783 Garraux Place NW		Transaction ID: C2076924		
	City Atlanta	State GA	Zip Code 30327	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer N/A		Occupation Retired		

Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
---	-------------------------------------

C.	Full Name (Last, First, Middle Initial) Helene Slocum		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 9		
	Mailing Address 2840 Danbury Way		Transaction ID: C2047758		
	City Minnetonka	State MN	Zip Code 55305	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer N/A		Occupation Homemaker		

Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00
---	------------------------------------

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Sherry Spence

Mailing Address 776 Upper Colonial Dr

City State Zip Code
Mendota Heights MN 55118

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

Name of Employer Friends of the SPCO Occupation Co-President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2063107

Amount of Each Receipt this Period
250.00

Election Cycle-to-Date ▼ 250.00

B.

Full Name (Last, First, Middle Initial)
Edson W. Spencer

Mailing Address 728 Widsten Circle

City State Zip Code
Wayzata MN 55391

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

Name of Employer Affinity Capital/Retired Occupation Venture Capitalist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2048005

Amount of Each Receipt this Period
1000.00

Election Cycle-to-Date ▼ 3400.00

C.

Full Name (Last, First, Middle Initial)
Gordon Merril Sprenger

Mailing Address 6244 Ridge Rd

City State Zip Code
Chanhassen MN 55317

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

Name of Employer N/A Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2043291

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date ▼ 500.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mark Stannard, M.D.
Mailing Address 3493 Heritage Avenue
City Stillwater State MN Zip Code 55082
FEC ID number of contributing federal political committee. **C**
Name of Employer Hudson Physicians Occupation physician
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt 12 / 31 / 2009
Transaction ID: C2077874
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Michael Steenson
Mailing Address 17 Skillman Lane
City North Oaks State MN Zip Code 55127
FEC ID number of contributing federal political committee. **C**
Name of Employer William Mitchell College of Law Occupation Professor of Law
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt 12 / 31 / 2009
Transaction ID: C2077849
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Norman V Steere
Mailing Address 17060 116th St N
City Stillwater State MN Zip Code 55082
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Retired
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 12 / 30 / 2009
Transaction ID: C2077533
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00
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 82 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

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

Mailing Address 1117 Sugarbush Ln

City State Zip Code
Waconia MN 55387

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

Name of Employer Occupation
Self-Employed Builder/developer

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

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

Transaction ID: C2055416

Amount of Each Receipt this Period
250.00

250.00

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

Mailing Address 10033 Purgatory Rd.

City State Zip Code
Eden Prairie MN 55347

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

Name of Employer Occupation
TOC Surgeon

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

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

Transaction ID: C2068599

Amount of Each Receipt this Period
2400.00

2400.00

C. Full Name (Last, First, Middle Initial)
Janette H Strathy

Mailing Address 3209 Galleria #1602

City State Zip Code
Edina MN 55436

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

Name of Employer Occupation
Park Nicollet Clinic OBGYN

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

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

Transaction ID: C2070627

Amount of Each Receipt this Period
500.00

500.00

SUBTOTAL of Receipts This Page (optional) ► **3150.00**

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 83 / 155
(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Joseph Strauss

Mailing Address 2963 Aspen Lake Dr NE

City Blaine State MN Zip Code 55449-7508

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

Name of Employer Strauss Mgmt. Com Occupation Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 11 / 19 / 2009
Transaction ID: C2065925
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
charles strinz

Mailing Address 4769 haug cir

City eagan State MN Zip Code 55122

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

Name of Employer Strinz Creative, Inc Occupation writer/producer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 12 / 12 / 2009
Transaction ID: C2072355
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Marsha M. Studer

Mailing Address 2237 Edgcumbe Road

City St. Paul State MN Zip Code 55116

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

Name of Employer Allina Occupation Health Care Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 12 / 04 / 2009
Transaction ID: C2070531
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 155
(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Claudia Swendseid

Mailing Address 8575 Kimbro Lane North

City State Zip Code
Stillwater MN 55082

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

Name of Employer Federal Reserve Bank of Minneapolis
Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: C2071138

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
marc F swiontkowski

Mailing Address 15500 Court rd.

City State Zip Code
Minnetonka MN 55345

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

Name of Employer Univ Minnesota Physicians
Occupation Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 850.00

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

Transaction ID: C2077983

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Karin Tansk, M.D.

Mailing Address 4410 Sunnyside Rd

City State Zip Code
Edina MN 55424

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

Name of Employer Self Employed
Occupation Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: C2060182

Amount of Each Receipt this Period
500.00

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

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

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

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

FOR LINE NUMBER: PAGE 85 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Christopher Tashjian

Mailing Address N8784 1060th Street

City State Zip Code
River Falls WI 54022

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

Name of Employer Occupation
River Falls Medical CLinic Physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

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

Transaction ID: C2062486

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Christopher Tashjian

Mailing Address N8784 1060th Street

City State Zip Code
River Falls WI 54022

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

Name of Employer Occupation
River Falls Medical CLinic Physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

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

Transaction ID: C2072419

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Charles Terzian, M.D.

Mailing Address 3871 Lilac Lane

City State Zip Code
Woodbury MN 55129

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

Name of Employer Occupation
Allina Medical Clinics Physician

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

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

Transaction ID: C2066641

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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 86 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Norrie Thomas

Mailing Address 100 Third Avenue S. #2107

City State Zip Code
Minneapolis MN 55401

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

Name of Employer Occupation
Self Employed Health Care

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

Date of Receipt
MM / DD / YYYY
11 / 13 / 2009

Transaction ID: C2063839

Amount of Each Receipt this Period
2400.00

4800.00

B. Full Name (Last, First, Middle Initial)
Ted Thompson

Mailing Address 772 Mimosa Lane

City State Zip Code
New Brighton MN 55112

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

Name of Employer Occupation
U of MN physician

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

Date of Receipt
MM / DD / YYYY
11 / 04 / 2009

Transaction ID: C2061831

Amount of Each Receipt this Period
750.00

750.00

C. Full Name (Last, First, Middle Initial)
Marcus thygeson

Mailing Address 3433 st. louis avenue

City State Zip Code
minneapolis MN 55416

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

Name of Employer Occupation
none physician

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

Date of Receipt
MM / DD / YYYY
12 / 31 / 2009

Transaction ID: C2077789

Amount of Each Receipt this Period
250.00

250.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 87 / 155
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) Gerald Timm		Date of Receipt
	Mailing Address 930 Mount Curve Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 1 0 / 2 0 0 9
	City	State	Zip Code
	Minneapolis	MN	55403
	FEC ID number of contributing federal political committee.		Transaction ID: C2062892
Name of Employer University of Minnesota		Occupation Physician	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00

B.	Full Name (Last, First, Middle Initial) Anne Towey, M.D.		Date of Receipt
	Mailing Address 4635 Maple Hill Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 0 5 / 2 0 0 9
	City	State	Zip Code
	Excelsior	MN	55331
	FEC ID number of contributing federal political committee.		Transaction ID: C2070626
Name of Employer Self Employed		Occupation Ophthalmologist	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00

C.	Full Name (Last, First, Middle Initial) Marcia Townley		Date of Receipt
	Mailing Address 600 S 2nd St Apt 105		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 0 4 / 2 0 0 9
	City	State	Zip Code
	Minneapolis	MN	55401
	FEC ID number of contributing federal political committee.		Transaction ID: C2070451
Name of Employer N/A		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 / 155

(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Sally I. Trippel, M.D.

Mailing Address 428 10th Ave SW

City State Zip Code
Rochester MN 55902

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

Name of Employer Occupation
Mayo Clinic Internist

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

Date of Receipt

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

Transaction ID: C2055419

Amount of Each Receipt this Period

250.00

B.

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

Mailing Address 3501 Zenith Avenue South

City State Zip Code
Minneapolis MN 55416

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

Name of Employer Occupation
N/A Volunteer

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

Date of Receipt

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

Transaction ID: C2055413

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
Robert Tufford

Mailing Address 301 Clifton Ave #4L

City State Zip Code
Minneapolis MN 55403

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

Name of Employer Occupation
Self Employed Financial Advisor

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

Date of Receipt

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

Transaction ID: C2064310

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
John W. Tulloch

Mailing Address 310 Oakwood Terrace

City State Zip Code
Vadnais Heights MN 55127

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

Name of Employer Occupation
UMPhysicians Neurologist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: C2077570

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Emily Anne Tuttle

Mailing Address 1225 Shoreline Dr

City State Zip Code
Wayzata MN 55391-9507

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: C2077795

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Kay Tuveson

Mailing Address 694 1st Ave

City State Zip Code
Mendota Heights MN 55118

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

Name of Employer Occupation
Health Partners Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: C2062383

Amount of Each Receipt this Period
250.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Jean Marie Ulland
Mailing Address 903 W Willard

City State Zip Code
Stillwater MN 55082

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

Name of Employer Occupation
Ind School District 834 Teacher

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

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

Transaction ID: C2068296

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Peter Ulland
Mailing Address 903 W Willard

City State Zip Code
Stillwater MN 55082

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

Name of Employer Occupation
Stillwater Medical Group Physician

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

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

Transaction ID: C2068292

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Bryn Vaaler
Mailing Address 3524 Hennepin Av South

City State Zip Code
Minneapolis MN 55408

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

Name of Employer Occupation
Dorsey & Whitney LLP Lawyer

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

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

Transaction ID: C2070630

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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 91 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Sharon Van de North

Mailing Address 2902 Mayowood Hills Dr. SW

City State Zip Code
Rochester MN 55902

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

Name of Employer N/A Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 12 / 08 / 2009
Transaction ID: C2071361
 Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Victoria Veach

Mailing Address 3336 York Bay

City State Zip Code
Woodbury MN 55125

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

Name of Employer none Occupation retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 13 / 2009
Transaction ID: C2063981
 Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Victoria Veach

Mailing Address 3336 York Bay

City State Zip Code
Woodbury MN 55125

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

Name of Employer none Occupation retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 12 / 31 / 2009
Transaction ID: C2077773
 Amount of Each Receipt this Period: 200.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 / 155
(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Zachary Vex

Mailing Address 2020 DuPont Ave S

City State Zip Code
Minneapolis MN 55408-2567

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

Name of Employer Zachary Vex Effects Occupation Manufacturer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: C2077555

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
richard voelbel

Mailing Address 152 hawthorne rd

City State Zip Code
hopkins MN 55343

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

Name of Employer zelle hofmann Occupation attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: C2051565

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
R.J. J. Walser

Mailing Address 4900 Meadville St.

City State Zip Code
Excelsior MN 55331

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3400.00

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

Transaction ID: C2077416

Amount of Each Receipt this Period
2400.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 93 / 155

(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
William Weisman

Mailing Address 2708 Irving Avenue S

City State Zip Code
Minneapolis MN 55408

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

Name of Employer Occupation
Weisman Enterprises Executive

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

Date of Receipt

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

Transaction ID: C2075964

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
Stephen Wellington

Mailing Address 2257 Gordon Avenue

City State Zip Code
St. Paul MN 55108

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

Name of Employer Occupation
Wellington Management, In- Real Estate

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

Date of Receipt

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

Transaction ID: C2075992

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Bonnie Welshons

Mailing Address 15007 62nd Ave N

City State Zip Code
Maple Grove MN 55311

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

Name of Employer Occupation
General Mills Director

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 900.00

Date of Receipt

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

Transaction ID: C2048774

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 94 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Bonnie Welshons

Mailing Address 15007 62nd Ave N

City State Zip Code
Maple Grove MN 55311

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

Name of Employer Occupation
General Mills Director

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

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

Transaction ID: C2076908

Amount of Each Receipt this Period
50.00

900.00

B. Full Name (Last, First, Middle Initial)
Wheelock Whitney

Mailing Address 7075 Highway 12

City State Zip Code
Maple Plain MN 55359-9711

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

Name of Employer Occupation
Retired Retired

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

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

Transaction ID: C2069628

Amount of Each Receipt this Period
500.00

500.00

C. Full Name (Last, First, Middle Initial)
Aretia Wilkins

Mailing Address 4260 Norwood Ln. N.

City State Zip Code
Plymouth MN 55442

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

Name of Employer Occupation
Risdall Marketing Group Account Supervisor

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

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

Transaction ID: C2063842

Amount of Each Receipt this Period
300.00

300.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 95 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Jason Merak Willett
Mailing Address 12811 53rd Street N.
City State Zip Code
Stillwater MN 55082
FEC ID number of contributing federal political committee. **C**
Name of Employer Metropolitan Council Occupation Finance
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 9
Transaction ID: C2064160
Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Jason Merak Willett
Mailing Address 12811 53rd Street N.
City State Zip Code
Stillwater MN 55082
FEC ID number of contributing federal political committee. **C**
Name of Employer Metropolitan Council Occupation Finance
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 9
Transaction ID: C2072836
Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Jason Merak Willett
Mailing Address 12811 53rd Street N.
City State Zip Code
Stillwater MN 55082
FEC ID number of contributing federal political committee. **C**
Name of Employer Metropolitan Council Occupation Finance
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9
Transaction ID: C2077957
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 300.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 96 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

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

Mailing Address 1950 Knox Avenue South

City State Zip Code
Minneapolis MN 55403

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

Name of Employer Occupation
Accenture management consultant

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

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

Transaction ID: C2070677

Amount of Each Receipt this Period
1000.00

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Kevin B. Winge

Mailing Address 4649 Minnehaha Ave S.

City State Zip Code
Minneapolis MN 55406

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

Name of Employer Occupation
Open Arms Executive Director

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

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

Transaction ID: C2061382

Amount of Each Receipt this Period
250.00

Amount of Each Receipt this Period
250.00

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

Mailing Address 27541 Country Hollow Ln

City State Zip Code
New Prague MN 56071

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

Name of Employer Occupation
Self Employed Dentist

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

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

Transaction ID: C2071283

Amount of Each Receipt this Period
500.00

Amount of Each Receipt this Period
500.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 97 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
David Wippman

Mailing Address 381 Walter Mondale Hall
229 19th Ave S.

City State Zip Code
Minneapolis MN 55455

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

Name of Employer University of Minnesota Law School Occupation Dean

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2062578

Amount of Each Receipt this Period
250.00

Election Cycle-to-Date ▼ 250.00

B.

Full Name (Last, First, Middle Initial)
Joy Wolf

Mailing Address 1000 Cannon Valley Dr
Apt. 105

City State Zip Code
Northfield MN 55057

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

Name of Employer N/A Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2076906

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date ▼ 500.00

C.

Full Name (Last, First, Middle Initial)
Lucy J. Wollaeger

Mailing Address PO Box 142

City State Zip Code
Calais VT 05648

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

Name of Employer Gifford Medical Center Occupation Emergency Medicine Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: C2069074

Amount of Each Receipt this Period
300.00

Election Cycle-to-Date ▼ 300.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 98 / 155

(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Ghita Worcester

Mailing Address 1911 Lincoln St. NE

City State Zip Code
Minneapolis MN 55418

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

Name of Employer Occupation
UCare Minnesota HMO Administrator

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

Date of Receipt

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

Transaction ID: C2060183

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
Jan KATHRYN Wuorema

Mailing Address 1119 Pearl St N

City State Zip Code
Prescott WI 54021

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

Name of Employer Occupation
American Telecare Vice President

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

Date of Receipt

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

Transaction ID: C2049867

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Barbara L Zajicek-Daggett

Mailing Address 16057 673rd Ave

City State Zip Code
Hutchinson MN 55350

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

Name of Employer Occupation
self Dentist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt

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

Transaction ID: C2076668

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ▶

850.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 99 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Donna Zimmerman

Mailing Address 43 Eldorado Circle

City State Zip Code
St. Paul MN 55110

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

Name of Employer HealthPartners Occupation Gov Relations

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period 1000.00

Transaction ID: C2063091

B. Full Name (Last, First, Middle Initial)
John Zimny, M.D.

Mailing Address 3542 Williamsburg Parkway

City State Zip Code
Woodbury MN 55129

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

Name of Employer Children's Hospitals and Clinics of Mi Occupation Staff Pediatrician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period 250.00

Transaction ID: C2069498

C. Full Name (Last, First, Middle Initial)
Daniel Zismer

Mailing Address 11009 Cavell Cir So.

City State Zip Code
Bloomington MN 55438

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

Name of Employer U of Mn. Occupation Professor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period 700.00

Transaction ID: C2067971

SUBTOTAL of Receipts This Page (optional) ► **1450.00**

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 101 / 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial)
Mark W. Banks

Mailing Address 4634 Edgebrook Place

City Edina State MN Zip Code 55424

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

Name of Employer None Occupation Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3400.00

Date of Receipt 12 / 31 / 2009
Transaction ID: C2158757
 Amount of Each Receipt this Period 1000.00

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
R.J. J. Walser

Mailing Address 4900 Meadville St.

City Excelsior State MN Zip Code 55331

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3400.00

Date of Receipt 12 / 29 / 2009
Transaction ID: C2222389
 Amount of Each Receipt this Period -1000.00

[MEMO ITEM]
* 02927D

C. Full Name (Last, First, Middle Initial)
R.J. J. Walser

Mailing Address 4900 Meadville St.

City Excelsior State MN Zip Code 55331

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3400.00

Date of Receipt 12 / 29 / 2009
Transaction ID: C2222390
 Amount of Each Receipt this Period 1000.00

[MEMO ITEM]
* 02927D

SUBTOTAL of Receipts This Page (optional) ► 0.00

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 102 / 155

(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
William Owen, M.D.

Mailing Address 45 Castro St Ste 402

City State Zip Code
San Francisco CA 94114

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

Name of Employer self Occupation
physician

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

Date of Receipt

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

Transaction ID: C2079949A

Amount of Each Receipt this Period

250.00

* Earmarked Contribution:
See Below

B.

Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 470.00

Date of Receipt

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

Transaction ID: C2079949AB

Amount of Each Receipt this Period

250.00

[MEMO ITEM]
Note: Above Contribution
earmarked through this or-
ganization.

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

165202.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 103 / 155
 (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Robins Kaplan PAC

Mailing Address 800 LaSalle Ave.
Suite 2800

City State Zip Code
Minneapolis MN 55402

FEC ID number of contributing federal political committee. **C** C00275909

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

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

Transaction ID: C2068258

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	2000.00

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)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) ADP Mailing Address 100 Northwest Point Blvd. City Elk River Village State IL Zip Code 60007 Purpose of Disbursement Employee Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D268085 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 9 Amount of Each Disbursement this Period 3532.07
B.	Full Name (Last, First, Middle Initial) ADP Mailing Address 100 Northwest Point Blvd. City Elk River Village State IL Zip Code 60007 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D268086 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 9 Amount of Each Disbursement this Period 6848.36
C.	Full Name (Last, First, Middle Initial) ADP Mailing Address 100 Northwest Point Blvd. City Elk River Village State IL Zip Code 60007 Purpose of Disbursement Employee Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D268413 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 8 / 2 0 0 9 Amount of Each Disbursement this Period 4098.39

SUBTOTAL of Disbursements This Page (optional) ▶	14478.82
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 105 / 155

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) ADP Mailing Address 100 Northwest Point Blvd. City Elk River Village State IL Zip Code 60007 Purpose of Disbursement Payroll fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D268421 Date of Disbursement 12 / 30 / 2009 Amount of Each Disbursement this Period 82.00 Category/Type
B.	Full Name (Last, First, Middle Initial) ADP Mailing Address 100 Northwest Point Blvd. City Elk River Village State IL Zip Code 60007 Purpose of Disbursement Payroll Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D357679 Date of Disbursement 12 / 16 / 2009 Amount of Each Disbursement this Period 77.00 Category/Type
C.	Full Name (Last, First, Middle Initial) Cathy Braaten Mailing Address 320 County Road 92 City Independence State MN Zip Code 55359 Purpose of Disbursement Fundraising Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D268069 Date of Disbursement 11 / 26 / 2009 Amount of Each Disbursement this Period 1750.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1909.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 106 / 155

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A. Full Name (Last, First, Middle Initial) Cathy Braaten <hr/> Mailing Address 320 County Road 92 <hr/> City Independence State MN Zip Code 55359 <hr/> Purpose of Disbursement Finance Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D258678 Date of Disbursement 10 / 01 / 2009
	Amount of Each Disbursement this Period 1500.00
	Category/ Type
	001
B. Full Name (Last, First, Middle Initial) Cathy Braaten <hr/> Mailing Address 320 County Road 92 <hr/> City Independence State MN Zip Code 55359 <hr/> Purpose of Disbursement Fundraising Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D261161 Date of Disbursement 10 / 11 / 2009
	Amount of Each Disbursement this Period 1500.00
	Category/ Type
	001
C. Full Name (Last, First, Middle Initial) Cathy Braaten <hr/> Mailing Address 320 County Road 92 <hr/> City Independence State MN Zip Code 55359 <hr/> Purpose of Disbursement Fundraising Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D264574 Date of Disbursement 10 / 26 / 2009
	Amount of Each Disbursement this Period 1500.00
	Category/ Type
	001

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Cathy Braaten

Mailing Address 320 County Road 92

City Independence State MN Zip Code 55359

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D267639
Date of Disbursement

11 / 09 / 2009

Amount of Each Disbursement this Period

1750.00

B.

Full Name (Last, First, Middle Initial)
Comcast

Mailing Address Po Box 3001

City Southeastern State PA Zip Code 19398

Purpose of Disbursement
Internet/Phones

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D267623
Date of Disbursement

11 / 05 / 2009

Amount of Each Disbursement this Period

426.87

C.

Full Name (Last, First, Middle Initial)
Comcast

Mailing Address Po Box 3001

City Southeastern State PA Zip Code 19398

Purpose of Disbursement
Internet/Phones

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D268064
Date of Disbursement

11 / 26 / 2009

Amount of Each Disbursement this Period

150.14

SUBTOTAL of Disbursements This Page (optional) ▶

2327.01

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) Brett Dornfeld Mailing Address 4708 Overlook Drive City Minneapolis State MN Zip Code 55437 Purpose of Disbursement Field Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D267033 Date of Disbursement 10 / 26 / 2009 Amount of Each Disbursement this Period 1000.00 Category/Type
B.	Full Name (Last, First, Middle Initial) Brett Dornfeld Mailing Address 4708 Overlook Drive City Minneapolis State MN Zip Code 55437 Purpose of Disbursement Field Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D261165 Date of Disbursement 10 / 11 / 2009 Amount of Each Disbursement this Period 1000.00 001 Category/Type
C.	Full Name (Last, First, Middle Initial) Brett Dornfeld Mailing Address 4708 Overlook Drive City Minneapolis State MN Zip Code 55437 Purpose of Disbursement Field Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D268068 Date of Disbursement 11 / 26 / 2009 Amount of Each Disbursement this Period 1000.00 Category/Type

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) Brett Dornfeld Mailing Address 4708 Overlook Drive City Minneapolis State MN Zip Code 55437 Purpose of Disbursement Field Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D357680 Date of Disbursement 12 / 22 / 2009 Amount of Each Disbursement this Period 600.00 Category/Type
B.	Full Name (Last, First, Middle Initial) Tricia England Mailing Address 2000 emerson Ave. South #5 City Minneapolis State MN Zip Code 55404 Purpose of Disbursement Field Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D268093 Date of Disbursement 12 / 15 / 2009 Amount of Each Disbursement this Period 428.57 Category/Type
C.	Full Name (Last, First, Middle Initial) First Data Mailing Address 6200 S. Quebec St. City Greenwood Village State CO Zip Code 80111 Purpose of Disbursement Credit Card Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D268379 Date of Disbursement 10 / 31 / 2009 Amount of Each Disbursement this Period 118.55 003 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

1147.12

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
First Data

Mailing Address 6200 S. Quebec St.

City Greenwood Village State CO Zip Code 80111

Purpose of Disbursement
Credit Card Discount

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D268380
Date of Disbursement

10 / 31 / 2009

Amount of Each Disbursement this Period

289.40

B.

Full Name (Last, First, Middle Initial)
First Data

Mailing Address 6200 S. Quebec St.

City Greenwood Village State CO Zip Code 80111

Purpose of Disbursement
Credit Card Processing

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D268381
Date of Disbursement

10 / 31 / 2009

Amount of Each Disbursement this Period

286.40

C.

Full Name (Last, First, Middle Initial)
First Data

Mailing Address 6200 S. Quebec St.

City Greenwood Village State CO Zip Code 80111

Purpose of Disbursement
Credit Card Discount

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D268580
Date of Disbursement

11 / 30 / 2009

Amount of Each Disbursement this Period

354.40

SUBTOTAL of Disbursements This Page (optional) ▶

930.20

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 112 / 155

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) First Data</p> <p>Mailing Address 6200 S. Quebec St.</p> <p>City Greenwood Village State CO Zip Code 80111</p> <p>Purpose of Disbursement Credit Card Processing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D268582</p> <p>Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 269.06</p> <p>003 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) First Data</p> <p>Mailing Address 6200 S. Quebec St.</p> <p>City Greenwood Village State CO Zip Code 80111</p> <p>Purpose of Disbursement Credit Card Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D268583</p> <p>Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 21.80</p> <p>003 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) First Data</p> <p>Mailing Address 6200 S. Quebec St.</p> <p>City Greenwood Village State CO Zip Code 80111</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D268587</p> <p>Date of Disbursement 12 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 45.00</p> <p>003 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

335.86

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 113 / 155

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) Honsa Binder Mailing Address 320 Spruce Street City Saint Paul State MN Zip Code 55101 Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D261151 Date of Disbursement 10 / 01 / 2009 Amount of Each Disbursement this Period 608.08 Category/ Type
B.	Full Name (Last, First, Middle Initial) Honsa Binder Mailing Address 320 Spruce Street City Saint Paul State MN Zip Code 55101 Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D261152 Date of Disbursement 10 / 15 / 2009 Amount of Each Disbursement this Period 299.20 Category/ Type 006
C.	Full Name (Last, First, Middle Initial) Honsa Binder Mailing Address 320 Spruce Street City Saint Paul State MN Zip Code 55101 Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D261153 Date of Disbursement 10 / 19 / 2009 Amount of Each Disbursement this Period 1260.30 Category/ Type 006

SUBTOTAL of Disbursements This Page (optional) ▶

2167.58

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Honsa Binder

Transaction ID: D261154
Date of Disbursement

Mailing Address 320 Spruce Street

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

City State Zip Code
Saint Paul MN 55101

Amount of Each Disbursement this Period

Purpose of Disbursement
Printing

006
Category/ Type

361.62

Candidate Name

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

State: District:

B.

Full Name (Last, First, Middle Initial)
Honsa Binder

Transaction ID: D267657
Date of Disbursement

Mailing Address 320 Spruce Street

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

City State Zip Code
Saint Paul MN 55101

Amount of Each Disbursement this Period

Purpose of Disbursement
Printing

Category/ Type

314.27

Candidate Name

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

State: District:

C.

Full Name (Last, First, Middle Initial)
Jason Isaacson

Transaction ID: D267638
Date of Disbursement

Mailing Address 19132 Ivanhoe Dr NW

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

City State Zip Code
Elk River MN 55330-5077

Amount of Each Disbursement this Period

Purpose of Disbursement
Management Consulting

Category/ Type

2500.00

Candidate Name

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

State: District:

SUBTOTAL of Disbursements This Page (optional)

3175.89

TOTAL This Period (last page this line number only)

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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 115 / 155

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Jason Isaacson

Transaction ID: D261158
Date of Disbursement

Mailing Address 19132 Ivanhoe Dr NW

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

City Elk River State MN Zip Code 55330-5077

Amount of Each Disbursement this Period

Purpose of Disbursement
Management Consulting
Candidate Name

001
Category/ Type

2500.00

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

B.

Full Name (Last, First, Middle Initial)
Jason Isaacson

Transaction ID: D267607
Date of Disbursement

Mailing Address 19132 Ivanhoe Dr NW

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

City Elk River State MN Zip Code 55330-5077

Amount of Each Disbursement this Period

Purpose of Disbursement
Management Consulting
Candidate Name

Category/ Type

2500.00

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

C.

Full Name (Last, First, Middle Initial)
Jason Isaacson

Transaction ID: D268071
Date of Disbursement

Mailing Address 19132 Ivanhoe Dr NW

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

City Elk River State MN Zip Code 55330-5077

Amount of Each Disbursement this Period

Purpose of Disbursement
Management Consulting
Candidate Name

Category/ Type

2500.00

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

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Jason Isaacson

Transaction ID: D268076
Date of Disbursement

Mailing Address 19132 Ivanhoe Dr NW

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

City Elk River State MN Zip Code 55330-5077

Amount of Each Disbursement this Period

415.40

Purpose of Disbursement
Mileage Reimbursement
Candidate Name

Category/ Type

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

B.

Full Name (Last, First, Middle Initial)
Lake Research Partners

Transaction ID: D261155
Date of Disbursement

Mailing Address 1726 M Street NW
Suite 1100

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

City Washington State DC Zip Code 20036

Amount of Each Disbursement this Period

17347.90

Purpose of Disbursement
Polling
Candidate Name

005 Category/ Type

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

C.

Full Name (Last, First, Middle Initial)
Lake Research Partners

Transaction ID: D267621
Date of Disbursement

Mailing Address 1726 M Street NW
Suite 1100

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

City Washington State DC Zip Code 20036

Amount of Each Disbursement this Period

5567.59

Purpose of Disbursement
Research
Candidate Name

Category/ Type

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

SUBTOTAL of Disbursements This Page (optional)

23330.89

TOTAL This Period (last page this line number only)

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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 117 / 155

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Lavender Media Inc

Transaction ID: D261167

Date of Disbursement

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

Mailing Address 3715 Chicago Avenue South

Amount of Each Disbursement this Period

398.00

City State Zip Code
Minneapolis MN 55407

Purpose of Disbursement
Advertising

004
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
LNR Properties

Transaction ID: D261172

Date of Disbursement

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

Mailing Address 319 Barry Ave S

Amount of Each Disbursement this Period

4000.00

City State Zip Code
Wayzata MN 55391

Purpose of Disbursement
Rent

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Minnesota DFL

Transaction ID: D261175

Date of Disbursement

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

Mailing Address 255 E. Plato BLvd

Amount of Each Disbursement this Period

2750.00

City State Zip Code
Saint Paul MN 55117

Purpose of Disbursement
Voter Activations Network

006
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

7148.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) Minnesota DFL	Transaction ID: D261176 Date of Disbursement 10 / 02 / 2009
	Mailing Address 255 E. Plato BLvd	Amount of Each Disbursement this Period 2.57
	City Saint Paul State MN Zip Code 55117	
	Purpose of Disbursement Voter Activation Network	006 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Minnesota DFL	Transaction ID: D268088 Date of Disbursement 12 / 03 / 2009
	Mailing Address 255 E. Plato BLvd	Amount of Each Disbursement this Period 75.00
	City Saint Paul State MN Zip Code 55117	
	Purpose of Disbursement Voter Activation Network	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) NGP	Transaction ID: D268079 Date of Disbursement 12 / 02 / 2009
	Mailing Address 1225 Eye St NW, Suite 1225	Amount of Each Disbursement this Period 6750.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Website	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	6827.57
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) NGP Mailing Address 1225 Eye St NW, Suite 1225 City Washington State DC Zip Code 20005 Purpose of Disbursement Emails Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D267620 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 9 Amount of Each Disbursement this Period 40.00
B.	Full Name (Last, First, Middle Initial) Office Max Mailing Address 3400 124th Avenue City Coon Rapids State MN Zip Code 55433 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D267616 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 9 Amount of Each Disbursement this Period 68.54
C.	Full Name (Last, First, Middle Initial) Emma Olson Mailing Address 209 East River Parkway #31 City Champlin State MN Zip Code 55316 Purpose of Disbursement Field Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D267613 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 9 Amount of Each Disbursement this Period 1214.26

SUBTOTAL of Disbursements This Page (optional)	1322.80
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Emma Olson</p> <p>Mailing Address 209 East River Parkway #31</p> <p>City Champlin State MN Zip Code 55316</p> <p>Purpose of Disbursement Field Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D267633</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1500.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Emma Olson</p> <p>Mailing Address 209 East River Parkway #31</p> <p>City Champlin State MN Zip Code 55316</p> <p>Purpose of Disbursement Field Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D268067</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1500.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Emma Olson</p> <p>Mailing Address 209 East River Parkway #31</p> <p>City Champlin State MN Zip Code 55316</p> <p>Purpose of Disbursement Field Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D268845</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="3500.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) Emma Olson Mailing Address 209 East River Parkway #31 City Champlin State MN Zip Code 55316 Purpose of Disbursement Field Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D357675 Date of Disbursement 10 / 06 / 2009 Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Ramway LLC Mailing Address 319 Barry Ave. South #301 City Clear Lake State MN Zip Code 55319 Purpose of Disbursement rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D268063 Date of Disbursement 11 / 26 / 2009 Amount of Each Disbursement this Period 2000.00
C.	Full Name (Last, First, Middle Initial) Aaron Rothe Mailing Address 665 Fairmount Ave City Saint Paul State MN Zip Code 55105 Purpose of Disbursement Mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D267658 Date of Disbursement 11 / 14 / 2009 Amount of Each Disbursement this Period 204.25

SUBTOTAL of Disbursements This Page (optional) ▶

2704.25

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) Aaron Rothe <hr/> Mailing Address 665 Fairmount Ave <hr/> City Saint Paul State MN Zip Code 55105 <hr/> Purpose of Disbursement Field Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D267636 Date of Disbursement 11 / 09 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Aaron Rothe <hr/> Mailing Address 665 Fairmount Ave <hr/> City Saint Paul State MN Zip Code 55105 <hr/> Purpose of Disbursement Field Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D267609 Date of Disbursement 10 / 26 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) Aaron Rothe <hr/> Mailing Address 665 Fairmount Ave <hr/> City Saint Paul State MN Zip Code 55105 <hr/> Purpose of Disbursement Field Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D261164 Date of Disbursement 10 / 11 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Aaron Rothe

Mailing Address 665 Fairmount Ave

City State Zip Code
Saint Paul MN 55105

Purpose of Disbursement
Field Consulting
Candidate Name

Category/
Type

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

Transaction ID: D268066
Date of Disbursement

11 / 26 / 2009

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
Leslie Sandberg

Mailing Address 607 Maple Park Drive

City State Zip Code
St. Paul MN 55118

Purpose of Disbursement
Communications Consulting
Candidate Name

Category/
Type

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

Transaction ID: D268080
Date of Disbursement

12 / 03 / 2009

Amount of Each Disbursement this Period

3500.00

C.

Full Name (Last, First, Middle Initial)
Leslie Sandberg

Mailing Address 607 Maple Park Drive

City State Zip Code
St. Paul MN 55118

Purpose of Disbursement
Communications Consulting
Candidate Name

001
Category/
Type

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

Transaction ID: D261157
Date of Disbursement

10 / 09 / 2009

Amount of Each Disbursement this Period

3500.00

SUBTOTAL of Disbursements This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Leslie Sandberg</p> <p>Mailing Address 607 Maple Park Drive</p> <p>City St. Paul State MN Zip Code 55118</p> <p>Purpose of Disbursement Communications Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D267625</p> <p>Date of Disbursement 11 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 3500.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address PO Box 36647 - 1CR</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D267650</p> <p>Date of Disbursement 10 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 350.40</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address PO Box 36647 - 1CR</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D267651</p> <p>Date of Disbursement 10 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 350.40</p>

SUBTOTAL of Disbursements This Page (optional) ►

4200.80

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)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address PO Box 36647 - 1CR</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D268415</p> <p>Date of Disbursement 12 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 397.40</p> <p>Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address PO Box 36647 - 1CR</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D268416</p> <p>Date of Disbursement 12 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 324.40</p> <p>Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Target</p> <p>Mailing Address 3300 124th Ave NW</p> <p>City Coon Rapids State MN Zip Code 55433-3805</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D268078</p> <p>Date of Disbursement 12 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 9.45</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

731.25

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) Target	Transaction ID: D268082 Date of Disbursement																			
	Mailing Address 3300 124th Ave NW	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	1		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	1		2	0	9													
	City Coon Rapids State MN Zip Code 55433-3805	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Office Supplies	<table border="1"><tr><td>44.42</td></tr></table>	44.42																		
44.42																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				
B.	Full Name (Last, First, Middle Initial) Target	Transaction ID: D268087 Date of Disbursement																			
	Mailing Address 3300 124th Ave NW	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	3		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	3		2	0	9													
	City Coon Rapids State MN Zip Code 55433-3805	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Office Supplies	<table border="1"><tr><td>27.21</td></tr></table>	27.21																		
27.21																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				
C.	Full Name (Last, First, Middle Initial) Target	Transaction ID: D267646 Date of Disbursement																			
	Mailing Address 3300 124th Ave NW	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	9		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	9		2	0	9													
	City Coon Rapids State MN Zip Code 55433-3805	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Office supplies	<table border="1"><tr><td>71.36</td></tr></table>	71.36																		
71.36																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional) ►

142.99

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) Target Mailing Address 3300 124th Ave NW City Coon Rapids State MN Zip Code 55433-3805 Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D267640 Date of Disbursement 10 / 31 / 2009 Amount of Each Disbursement this Period 34.20 Category/Type
B.	Full Name (Last, First, Middle Initial) Union House Mailing Address 26796 Felton Ave City Wyoming State MN Zip Code 55092 Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D267626 Date of Disbursement 11 / 05 / 2009 Amount of Each Disbursement this Period 170.00 Category/Type
C.	Full Name (Last, First, Middle Initial) Union House Mailing Address 26796 Felton Ave City Wyoming State MN Zip Code 55092 Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D267628 Date of Disbursement 11 / 05 / 2009 Amount of Each Disbursement this Period 242.21 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

446.41

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)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

<p>A. Full Name (Last, First, Middle Initial) Union House</p> <p>Mailing Address 26796 Felton Ave</p> <p>City Wyoming State MN Zip Code 55092</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D268072</p> <p>Date of Disbursement 11 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 1003.13</p>
<p>B. Full Name (Last, First, Middle Initial) United State Post Office</p> <p>Mailing Address 12299 Champlin Drive</p> <p>City Champlin State MN Zip Code 55316</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D268077</p> <p>Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 442.41</p>
<p>C. Full Name (Last, First, Middle Initial) United States Post Office</p> <p>Mailing Address 2168 7th Ave</p> <p>City Anoka State MN Zip Code 55303</p> <p>Purpose of Disbursement Stamps</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D268411</p> <p>Date of Disbursement 12 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 576.46</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2022.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) United States Post Office Mailing Address 2168 7th Ave City Anoka State MN Zip Code 55303 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D267629 Date of Disbursement 11 / 05 / 2009 Amount of Each Disbursement this Period 176.00 Category/Type
B.	Full Name (Last, First, Middle Initial) United States Post Office Mailing Address 2168 7th Ave City Anoka State MN Zip Code 55303 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D267630 Date of Disbursement 11 / 09 / 2009 Amount of Each Disbursement this Period 100.00 Category/Type
C.	Full Name (Last, First, Middle Initial) United States Post Office Mailing Address 2168 7th Ave City Anoka State MN Zip Code 55303 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D267645 Date of Disbursement 11 / 10 / 2009 Amount of Each Disbursement this Period 185.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

461.00

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)

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

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) United States Post Office Mailing Address 2168 7th Ave City Anoka State MN Zip Code 55303 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D267661 Date of Disbursement 11 / 16 / 2009 Amount of Each Disbursement this Period 220.00 Category/Type
B.	Full Name (Last, First, Middle Initial) United States Post Office Mailing Address 2168 7th Ave City Anoka State MN Zip Code 55303 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D267653 Date of Disbursement 10 / 13 / 2009 Amount of Each Disbursement this Period 308.00 Category/Type
C.	Full Name (Last, First, Middle Initial) United States Post Office Mailing Address 2168 7th Ave City Anoka State MN Zip Code 55303 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D259171 Date of Disbursement 10 / 07 / 2009 Amount of Each Disbursement this Period 283.40 001 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

811.40

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
United States Post Office

Mailing Address 2168 7th Ave

City Anoka State MN Zip Code 55303

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D267617
Date of Disbursement

10 / 19 / 2009

Amount of Each Disbursement this Period

440.00

B.

Full Name (Last, First, Middle Initial)
USPS

Mailing Address Anoka

City Anoka State MN Zip Code 55303

Purpose of Disbursement
Mail

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D268419
Date of Disbursement

12 / 21 / 2009

Amount of Each Disbursement this Period

177.22

C.

Full Name (Last, First, Middle Initial)
USPS

Mailing Address Anoka

City Anoka State MN Zip Code 55303

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D357677
Date of Disbursement

12 / 15 / 2009

Amount of Each Disbursement this Period

201.36

SUBTOTAL of Disbursements This Page (optional) ▶

818.58

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 25505</p> <p>City Lehigh Valley State PA Zip Code 18002</p> <p>Purpose of Disbursement Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D268084</p> <p>Date of Disbursement 12 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 378.54</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 25505</p> <p>City Lehigh Valley State PA Zip Code 18002</p> <p>Purpose of Disbursement Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D268075</p> <p>Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 80.35</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 25505</p> <p>City Lehigh Valley State PA Zip Code 18002</p> <p>Purpose of Disbursement Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D267032</p> <p>Date of Disbursement 12 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 137.74</p>

SUBTOTAL of Disbursements This Page (optional) ▶

596.63

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 25505</p> <p>City Lehigh Valley State PA Zip Code 18002</p> <p>Purpose of Disbursement Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D267656</p> <p>Date of Disbursement 11 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 126.76</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 25505</p> <p>City Lehigh Valley State PA Zip Code 18002</p> <p>Purpose of Disbursement Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D261170</p> <p>Date of Disbursement 10 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 179.17</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Claire Vinocur</p> <p>Mailing Address 2429 Emerson Ave S. Apt B2</p> <p>City Minneapolis State MN Zip Code 55405</p> <p>Purpose of Disbursement Finance Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D267634</p> <p>Date of Disbursement 11 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1305.93

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Trevor T Willett</p> <p>Mailing Address 12811 53rd st. North</p> <p>City Stillwater State MN Zip Code 55082</p> <p>Purpose of Disbursement Communications Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D261160</p> <p>Date of Disbursement 10 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 750.00</p> <p>Category/Type 001</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Trevor T Willett</p> <p>Mailing Address 12811 53rd st. North</p> <p>City Stillwater State MN Zip Code 55082</p> <p>Purpose of Disbursement Communications Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D267610</p> <p>Date of Disbursement 10 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Trevor T Willett</p> <p>Mailing Address 12811 53rd st. North</p> <p>City Stillwater State MN Zip Code 55082</p> <p>Purpose of Disbursement Communications Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D267632</p> <p>Date of Disbursement 11 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3750.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Trevor T Willett

Transaction ID: D268065
Date of Disbursement

Mailing Address 12811 53rd st. North

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	0	9

City State Zip Code
Stillwater MN 55082

Amount of Each Disbursement this Period

1500.00

Purpose of Disbursement
Communications Consulting

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Aaron Rothe

Transaction ID: D259192
Date of Disbursement

Mailing Address 665 Fairmount Ave

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	0	9

City State Zip Code
Saint Paul MN 55105

Amount of Each Disbursement this Period

121.56

Purpose of Disbursement
Reimbursement

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Best Buy

Transaction ID: D268532
Date of Disbursement

Mailing Address 12633 Riverdale Blvd NW

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	0	9

City State Zip Code
Coon Rapids MN 55448-6709

Amount of Each Disbursement this Period

12.84

Purpose of Disbursement
Computer Supplies

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1621.56

TOTAL This Period (last page this line number only)

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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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

<p>A. Full Name (Last, First, Middle Initial) Cathy Braaten</p> <p>Mailing Address 320 County Road 92</p> <p>City Independence State MN Zip Code 55359</p> <p>Purpose of Disbursement Credit Card</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: D261162 Date of Disbursement: 10 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 187.75</p>
<p>B. Full Name (Last, First, Middle Initial) Brett Dornfeld</p> <p>Mailing Address 4708 Overlook Drive</p> <p>City Minneapolis State MN Zip Code 55437</p> <p>Purpose of Disbursement Credit Card</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: D261166 Date of Disbursement: 10 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 15.38</p>
<p>C. Full Name (Last, First, Middle Initial) Aaron Rothe</p> <p>Mailing Address 665 Fairmount Ave</p> <p>City Saint Paul State MN Zip Code 55105</p> <p>Purpose of Disbursement Office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: D261169 Date of Disbursement: 10 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 139.16</p>

SUBTOTAL of Disbursements This Page (optional) ▶

342.29

TOTAL This Period (last page this line number only) ▶

A. Form/Schedule : **SB17**
Transaction ID : **D261162**

Cathy Braaten made purchases on behalf of the Maureen Reed for Congress campaign - Cub Foods \$180.27
Cub Foods \$7.48

B. Form/Schedule : **SB17**
Transaction ID : **D261166**

Bret Dornfeld made a purchase on behalf of Maureen Reed for Congress - Sunfish Express \$15.38

C. Form/Schedule : **SB17**
Transaction ID : **D261169**

Reimbursements for purchases made on behalf of the Maureen Reed campaign at the following locations
Office Depot \$47.42 K-Mart \$10.05 Blaze Liquors \$33.52 (Silent auction) Office Max \$48.17

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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Office Max

Mailing Address 3400 124th Avenue

City Coon Rapids State MN Zip Code 55433

Purpose of Disbursement
Ink

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D268566
Date of Disbursement

10 / 08 / 2009

Amount of Each Disbursement this Period

48.17

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Cathy Braaten

Mailing Address 320 County Road 92

City Independence State MN Zip Code 55359

Purpose of Disbursement
Reimbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D267611
Date of Disbursement

10 / 29 / 2009

Amount of Each Disbursement this Period

69.73

C.

Full Name (Last, First, Middle Initial)
Aaron Rothe

Mailing Address 665 Fairmount Ave

City Saint Paul State MN Zip Code 55105

Purpose of Disbursement
Reimbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D267612
Date of Disbursement

10 / 29 / 2009

Amount of Each Disbursement this Period

91.13

SUBTOTAL of Disbursements This Page (optional) ▶

160.86

TOTAL This Period (last page this line number only) ▶

C. Form/Schedule : **SB17**
Transaction ID : **D267612**

Aaron Rothe made purchases on behalf of the Maureen Reed for Congress campaign Kowalski's \$8.87 Target \$2.14 Office Depot \$32.04 Walmart \$48.08

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) Emma Olson	Transaction ID: D267614 Date of Disbursement 10 / 29 / 2009
	Mailing Address 209 East River Parkway #31	Amount of Each Disbursement this Period 80.41
	City Champlin State MN Zip Code 55316	
	Purpose of Disbursement Reimbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Office Max	Transaction ID: D268541 Date of Disbursement 10 / 12 / 2009
	Mailing Address 3400 124th Avenue	Amount of Each Disbursement this Period 47.95
	City Coon Rapids State MN Zip Code 55433	
	Purpose of Disbursement Office Supplies	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Target	Transaction ID: D268538 Date of Disbursement 10 / 12 / 2009
	Mailing Address 3300 124th Ave NW	Amount of Each Disbursement this Period 11.99
	City Coon Rapids State MN Zip Code 55433-3805	
	Purpose of Disbursement Office Supplies	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	80.41
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) Target	Transaction ID: D268540 Date of Disbursement 10 / 16 / 2009
	Mailing Address 3300 124th Ave NW	Amount of Each Disbursement this Period 20.47
	City Coon Rapids State MN Zip Code 55433-3805	
	Purpose of Disbursement Office Supplies	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Leslie Sandberg	Transaction ID: D267624 Date of Disbursement 11 / 05 / 2009
	Mailing Address 607 Maple Park Drive	Amount of Each Disbursement this Period 458.20
	City St. Paul State MN Zip Code 55118	
	Purpose of Disbursement Travel Reimbursement	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Northwest Airlines	Transaction ID: D268575 Date of Disbursement 11 / 05 / 2009
	Mailing Address 5101 Northwest Dr.	Amount of Each Disbursement this Period 458.20
	City Saint Paul State MN Zip Code 55121	
	Purpose of Disbursement Airline Tickets	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	458.20
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Emma Olson

Transaction ID: D267659
Date of Disbursement

Mailing Address 209 East River Parkway
#31

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	0	9

City State Zip Code
Champlin MN 55316

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement
Reimbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Transaction ID: D268484
Date of Disbursement

Mailing Address PO Box 25505

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	3		2	0	0	9

City State Zip Code
Lehigh Valley PA 18002

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement
Cell Phone

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Aaron Rothe

Transaction ID: D267660
Date of Disbursement

Mailing Address 665 Fairmount Ave

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	0	9

City State Zip Code
Saint Paul MN 55105

Amount of Each Disbursement this Period

147.30

Purpose of Disbursement
Reimbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

247.30

TOTAL This Period (last page this line number only) ►

--

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) Best Buy	Transaction ID: D268466 Date of Disbursement 10 / 27 / 2009
	Mailing Address 12633 Riverdale Blvd NW	Amount of Each Disbursement this Period 91.03
	City Coon Rapids State MN Zip Code 55448-6709	[MEMO ITEM]
	Purpose of Disbursement Office Supplies Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Best Buy	Transaction ID: D268471 Date of Disbursement 11 / 03 / 2009
	Mailing Address 12633 Riverdale Blvd NW	Amount of Each Disbursement this Period 34.27
	City Coon Rapids State MN Zip Code 55448-6709	[MEMO ITEM]
	Purpose of Disbursement Office Supplies Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Cathy Braaten	Transaction ID: D268062 Date of Disbursement 11 / 26 / 2009
	Mailing Address 320 County Road 92	Amount of Each Disbursement this Period 165.35
	City Independence State MN Zip Code 55359	[MEMO ITEM]
	Purpose of Disbursement Reimbursement Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	▶	165.35
TOTAL This Period (last page this line number only)	▶	

C. Form/Schedule : **SB17**

Cathy Braaten made purchases on behalf of the campaign Costco \$156.35 Standard Parking \$9.00

Transaction ID : **D268062**

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Emma Olson

Mailing Address 209 East River Parkway
#31

City Champlin State MN Zip Code 55316

Purpose of Disbursement
Reimbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D268073
Date of Disbursement

11 / 24 / 2009

Amount of Each Disbursement this Period

441.87

B.

Full Name (Last, First, Middle Initial)
Office Max

Mailing Address 3400 124th Avenue

City Coon Rapids State MN Zip Code 55433

Purpose of Disbursement
office Supplies

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D268436
Date of Disbursement

11 / 23 / 2009

Amount of Each Disbursement this Period

71.93

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Office Max

Mailing Address 3400 124th Avenue

City Coon Rapids State MN Zip Code 55433

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D268438
Date of Disbursement

10 / 22 / 2009

Amount of Each Disbursement this Period

59.52

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

441.87

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) Emma Olson	Transaction ID: D268445 Date of Disbursement 10 / 29 / 2009
	Mailing Address 209 East River Parkway #31	Amount of Each Disbursement this Period 287.85
	City Champlin State MN Zip Code 55316	
	Purpose of Disbursement Mileage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) United States Post Office	Transaction ID: D268441 Date of Disbursement 11 / 10 / 2009
	Mailing Address 2168 7th Ave	Amount of Each Disbursement this Period 5.57
	City Anoka State MN Zip Code 55303	
	Purpose of Disbursement Postage Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Cathy Braaten	Transaction ID: D270256 Date of Disbursement 12 / 07 / 2009
	Mailing Address 320 County Road 92	Amount of Each Disbursement this Period 1262.52
	City Independence State MN Zip Code 55359	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[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)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.	Full Name (Last, First, Middle Initial) Jason Isaacson Mailing Address 19132 Ivanhoe Dr NW City Elk River State MN Zip Code 55330-5077 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D270257 Date of Disbursement 12 / 07 / 2009	Amount of Each Disbursement this Period 1714.77 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Emma Olson Mailing Address 209 East River Parkway #31 City Champlin State MN Zip Code 55316 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D270258 Date of Disbursement 12 / 07 / 2009	Amount of Each Disbursement this Period 1111.77 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Aaron Rothe Mailing Address 665 Fairmount Ave City Saint Paul State MN Zip Code 55105 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D270259 Date of Disbursement 12 / 07 / 2009	Amount of Each Disbursement this Period 771.04 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Claire Vinocur

Mailing Address 2429 Emerson Ave S. Apt B2

City State Zip Code
Minneapolis MN 55405

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D270260
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	7		2	0	0	9

Amount of Each Disbursement this Period

876.49

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Trevor T Willett

Mailing Address 12811 53rd st. North

City State Zip Code
Stillwater MN 55082

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D270261
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	7		2	0	0	9

Amount of Each Disbursement this Period

1111.77

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
ADP

Mailing Address 100 Northwest Point Blvd.

City State Zip Code
Elk River Village IL 60007

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D268412
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	8		2	0	0	9

Amount of Each Disbursement this Period

8490.62

SUBTOTAL of Disbursements This Page (optional)

8490.62

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Cathy Braaten

Mailing Address 320 County Road 92

City Independence State MN Zip Code 55359

Purpose of Disbursement
Payroll

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D270255
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	8		2	0	0	9

Amount of Each Disbursement this Period

1262.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Ryan Cook

Mailing Address 499 Charles Street

City Torrington State CT Zip Code 06790

Purpose of Disbursement
Payroll

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D270254
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	8		2	0	0	9

Amount of Each Disbursement this Period

821.12

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Tricia England

Mailing Address 2000 emerson Ave. South #5

City Minneapolis State MN Zip Code 55404

Purpose of Disbursement
Payroll

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D270253
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	8		2	0	0	9

Amount of Each Disbursement this Period

821.12

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Jason Isaacson

Mailing Address 19132 Ivanhoe Dr NW

City Elk River State MN Zip Code 55330-5077

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D270249

Date of Disbursement

12 / 18 / 2009

Amount of Each Disbursement this Period

1714.77

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Emma Olson

Mailing Address 209 East River Parkway #31

City Champlin State MN Zip Code 55316

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D270251

Date of Disbursement

12 / 18 / 2009

Amount of Each Disbursement this Period

1111.77

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Aaron Rothe

Mailing Address 665 Fairmount Ave

City Saint Paul State MN Zip Code 55105

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D270250

Date of Disbursement

12 / 18 / 2009

Amount of Each Disbursement this Period

771.04

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
Office Max

Mailing Address 3400 124th Avenue

City Coon Rapids State MN Zip Code 55433

Purpose of Disbursement
Office Supplies
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: D268548
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	0	9

Amount of Each Disbursement this Period

62.24

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Office Max

Mailing Address 3400 124th Avenue

City Coon Rapids State MN Zip Code 55433

Purpose of Disbursement
Office Supplies
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: D268549
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	0	9

Amount of Each Disbursement this Period

82.88

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

129461.59

**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)

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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input checked="" type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Maureen Reed for Congress

A.

Full Name (Last, First, Middle Initial)
janet zander

Mailing Address 230 crestway lane

City State Zip Code
west saint paul MN 55118

Purpose of Disbursement
Contribution Refund

Candidate Name

010
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D259199

Date of Disbursement

10 / 01 / 2009

Amount of Each Disbursement this Period

200.00

SUBTOTAL of Disbursements This Page (optional)

200.00

TOTAL This Period (last page this line number only)

200.00