

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Citizens to Elect Rick Larsen

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

	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)).....	18385.00	1248531.72
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	18385.00	1248131.72
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	166804.96	981199.60
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	4253.34
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	166804.96	976946.26
8. Cash on Hand at Close of Reporting Period (from Line 27).....	394202.38	
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
Citizens to Elect Rick Larsen

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

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

(i) Itemized (use Schedule A).....

4950.00

496463.42

(ii) Unitemized.....

1185.00

45494.59

(iii) TOTAL of contributions

6135.00

541958.01

from individuals..... ▶

0.00

1720.88

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

12250.00

704852.83

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans)

18385.00

1248531.72

(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

0.00

0.00

(add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

0.00

4253.34

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

498.35

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

18385.00

1253283.41

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	166804.96	981199.60
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.....	0.00	400.00
(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)).....	0.00	400.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	166804.96	981599.60

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	542622.34
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	18385.00
25. SUBTOTAL (add Line 23 and Line 24).....	561007.34
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	166804.96
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	394202.38

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 5 / 26
(check only one)	
<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"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Citizens to Elect Rick Larsen

A.	Full Name (Last, First, Middle Initial) William R Applegate		Date of Receipt
	Mailing Address 2780 David Ln		<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 0 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Oak Harbor	WA	98277-8912
	FEC ID number of contributing federal political committee.		Transaction ID: C28896
	C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 100.00	
Name of Employer Retired		Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008		Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text"/> 400.00	
<input type="checkbox"/> Other (specify) ▼			

B.	Full Name (Last, First, Middle Initial) Michael D Bradburn		Date of Receipt
	Mailing Address 1323 Chuckanut 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 0 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Bellingham	WA	98229
	FEC ID number of contributing federal political committee.		Transaction ID: C28884
	C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 250.00	
Name of Employer Information Requested		Occupation Information Requested	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008		Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text"/> 250.00	
<input type="checkbox"/> Other (specify) ▼			

C.	Full Name (Last, First, Middle Initial) Susan Burke		Date of Receipt
	Mailing Address 1506 Austin Lane		<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 0 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Bellingham	WA	98229
	FEC ID number of contributing federal political committee.		Transaction ID: C28877
	C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 250.00	
Name of Employer Information Requested		Occupation Information Requested	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008		Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text"/> 250.00	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 600.00
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: (check only one)	PAGE 6 / 26
	<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)
Citizens to Elect Rick Larsen

A.	Full Name (Last, First, Middle Initial) Steven M Chapman		Date of Receipt
	Mailing Address 3545 Woodside Dr.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Columbus	IN	47203
	FEC ID number of contributing federal political committee. C		Transaction ID: C28899
Name of Employer Cummins Co.		Occupation VP	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Dave Christensen		Date of Receipt
	Mailing Address PO Box 5068		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Bellingham	WA	98227
	FEC ID number of contributing federal political committee. C		Transaction ID: C28885
Name of Employer Self		Occupation Christensen Design	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Timothy Keating		Date of Receipt
	Mailing Address 2006 North Upton St.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Arlington	VA	22207
	FEC ID number of contributing federal political committee. C		Transaction ID: C28886
Name of Employer Boeing		Occupation Senior Vice President	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3800.00
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 7 / 26
	(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)
Citizens to Elect Rick Larsen

A.	Full Name (Last, First, Middle Initial) J Bruce Smith		Date of Receipt
	Mailing Address 2604 Donovan Ave		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Bellingham	WA	98225
	FEC ID number of contributing federal political committee.		Transaction ID: C28882
Name of Employer Information Requested Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="300.00"/>	
Occupation Information Requested		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Election Cycle-to-Date ▼ <input type="text" value="300.00"/>			

B.	Full Name (Last, First, Middle Initial) Robert Tull		Date of Receipt
	Mailing Address 2480 Heights Dr		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Ferndale	WA	98248-9280
	FEC ID number of contributing federal political committee.		Transaction ID: C28879
Name of Employer Self Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="250.00"/>	
Occupation Lawyer (landuse)		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Election Cycle-to-Date ▼ <input type="text" value="250.00"/>			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="550.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="4950.00"/>

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

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

FOR LINE NUMBER: PAGE 8 / 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens to Elect Rick Larsen

A. Full Name (Last, First, Middle Initial)
Alexander & Baldwin, Inc. FEDPAC (A & B FEDPAC)
Mailing Address P.O. BOX 3440

City Honolulu State HI Zip Code 96801

FEC ID number of contributing federal political committee. **C** C00017681

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 10 / 15 / 2008
Transaction ID: C28893
 Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
EL PASO CORPORATION PAC
Mailing Address 1001 LOUISIANA STREET N1134S
SUITE N1134S

City HOUSTON State TX Zip Code 77002

FEC ID number of contributing federal political committee. **C** C00093948

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 15 / 2008
Transaction ID: C28892
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
FEDERAL MANAGERS' ASSOCIATION POLITICAL ACTION COM
Mailing Address 1641 PRINCE STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00164848

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 10 / 15 / 2008
Transaction ID: C28890
 Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 9 / 26
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Citizens to Elect Rick Larsen

A. Full Name (Last, First, Middle Initial)
Laborers' Political League-laborers' International Union Of Na
Mailing Address 905 16th StreetT, N.W.
City Washington State DC Zip Code 20006
FEC ID number of contributing federal political committee. **C** C00007922
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 10000.00
Date of Receipt 10 / 15 / 2008
Transaction ID: C28889
Amount of Each Receipt this Period 5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
San Manuel Tribal Administration
Mailing Address 26569 Community Center Drive
City Highland State CA Zip Code 92346
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3000.00
Date of Receipt 10 / 15 / 2008
Transaction ID: C28888
Amount of Each Receipt this Period 2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Sheet Metal Workers International Association Political Action League
Mailing Address 1750 New York Avenue
City Washington State DC Zip Code 20006
FEC ID number of contributing federal political committee. **C** C00007542
Name of Employer Occupation
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 10000.00
Date of Receipt 10 / 15 / 2008
Transaction ID: C28887
Amount of Each Receipt this Period 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 9500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 10 / 26	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Citizens to Elect Rick Larsen

A.

Full Name (Last, First, Middle Initial) WYETH GOOD GOVERNMENT FUND		Date of Receipt
Mailing Address Five Giralda Farms		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
City	State	Zip Code
Madison	NJ	07940
FEC ID number of contributing federal political committee.		Transaction ID: C28891
<input type="text" value="C"/> <input type="text" value="C00115303"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008	Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="12250.00"/>

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)
Citizens to Elect Rick Larsen

<p>A. Full Name (Last, First, Middle Initial) American Express Merchant Services</p> <p>Mailing Address PO Box 53773</p> <p>City Phoenix State AZ Zip Code 85072-3773</p> <p>Purpose of Disbursement Merchant Fee</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D4984</p> <p>Date of Disbursement 10 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 17.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) AMS Communications</p> <p>Mailing Address 447 Battery St Ste 250</p> <p>City San Francisco State CA Zip Code 94111-3210</p> <p>Purpose of Disbursement Mail Piece</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D4986</p> <p>Date of Disbursement 10 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 35100.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) AMS Communications</p> <p>Mailing Address 447 Battery St Ste 250</p> <p>City San Francisco State CA Zip Code 94111-3210</p> <p>Purpose of Disbursement Mail Piece</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D5014</p> <p>Date of Disbursement 10 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 35100.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

70217.50

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
Citizens to Elect Rick Larsen

A.

Full Name (Last, First, Middle Initial)
Avenet, LLC

Mailing Address 1380 Energy Ln Ste 206

City State Zip Code
Saint Paul MN 55108-5253

Purpose of Disbursement
Web Hosting

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D5009

Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

225.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Bank of America Merchant Services

Mailing Address PO Box 37000

City State Zip Code
San Francisco CA 94137-0001

Purpose of Disbursement
Merchant Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D4976

Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

156.69

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address 1602 Hewitt Ave

City State Zip Code
Everett WA 98201-3598

Purpose of Disbursement
Wire Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D4987

Date of Disbursement

10 / 06 / 2008

Amount of Each Disbursement this Period

25.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ►

406.69

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)
Citizens to Elect Rick Larsen

A.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address 1602 Hewitt Ave City Everett State WA Zip Code 98201-3598 Purpose of Disbursement Wire Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D5008 Date of Disbursement 10 / 10 / 2008 Amount of Each Disbursement this Period 25.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Bank of America Mailing Address 1602 Hewitt Ave City Everett State WA Zip Code 98201-3598 Purpose of Disbursement Wire Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D5015 Date of Disbursement 10 / 14 / 2008 Amount of Each Disbursement this Period 25.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Thomas Boucher Mailing Address 2320 E Kincaid St City Mount Vernon State WA Zip Code 98274-4747 Purpose of Disbursement Mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D4996 Date of Disbursement 10 / 01 / 2008 Amount of Each Disbursement this Period 750.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	800.00
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)

<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)
Citizens to Elect Rick Larsen

A.	Full Name (Last, First, Middle Initial) Thomas Boucher	Transaction ID: D4995 Date of Disbursement 10 / 01 / 2008
	Mailing Address 2320 E Kincaid St	Amount of Each Disbursement this Period 2915.79
	City Mount Vernon State WA Zip Code 98274-4747	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement October Salary Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Comcast	Transaction ID: D4982 Date of Disbursement 10 / 01 / 2008
	Mailing Address 900 132nd St SW	Amount of Each Disbursement this Period 132.99
	City Everett State WA Zip Code 98204	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Internet Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Consolidated Graphics/AAA Printing	Transaction ID: D4974 Date of Disbursement 10 / 01 / 2008
	Mailing Address 13600 NE 126th PI Suite C	Amount of Each Disbursement this Period 354.50
	City Kirkland State WA Zip Code 98034-8720	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Mailing Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	3403.28
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Citizens to Elect Rick Larsen

A.

Full Name (Last, First, Middle Initial)
Brooke N Davis

Mailing Address 14207 51st Ave SE

City Everett State WA Zip Code 98208

Purpose of Disbursement
Mileage
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D4980
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

750.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Brooke N Davis

Mailing Address 14207 51st Ave SE

City Everett State WA Zip Code 98208

Purpose of Disbursement
October Salary
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D4978
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

4798.67

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Daylight Properties

Mailing Address 115 Unity St Suite B

City Bellingham State WA Zip Code 98225

Purpose of Disbursement
Rent
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D5021
Date of Disbursement

10 / 13 / 2008

Amount of Each Disbursement this Period

430.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

5978.67

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)
Citizens to Elect Rick Larsen

A.

Full Name (Last, First, Middle Initial)
Dixon Davis Media

Mailing Address 1233 20th St NW Suite 610

City Washington State DC Zip Code 20036

Purpose of Disbursement

Radio Production

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2008 Primary General Other (specify) ▼

Transaction ID: D5018

Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

5152.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Fiorello Consulting

Mailing Address 3914 Barcroft Mews Court

City Falls Church State VA Zip Code 22041

Purpose of Disbursement

Fundraising Consulintg

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2008 Primary General Other (specify) ▼

Transaction ID: D4988

Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

3000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Graham Harrison

Mailing Address 1319 Clearbrook Drive

City Bellingham State WA Zip Code 98229

Purpose of Disbursement

October Salary

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2008 Primary General Other (specify) ▼

Transaction ID: D4972

Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

2192.12

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

10344.12

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)
Citizens to Elect Rick Larsen

A.	Full Name (Last, First, Middle Initial) Graham Harrison	Transaction ID: D4973 Date of Disbursement 10 / 01 / 2008
	Mailing Address 1319 Clearbrook Drive	Amount of Each Disbursement this Period 500.00
	City Bellingham State WA Zip Code 98229	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Mileage Reimb Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Ivar's	Transaction ID: D5010 Date of Disbursement 10 / 08 / 2008
	Mailing Address 710 Front St.	Amount of Each Disbursement this Period 162.59
	City Mukilteo State WA Zip Code 98275	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel Meal Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ivar's	Transaction ID: D5023 Date of Disbursement 10 / 14 / 2008
	Mailing Address 710 Front St.	Amount of Each Disbursement this Period 51.89
	City Mukilteo State WA Zip Code 98275	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel Meal Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	714.48
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)
Citizens to Elect Rick Larsen

A.	Full Name (Last, First, Middle Initial) Jeff Merkley	Transaction ID: D5022 Date of Disbursement 10 / 15 / 2008
	Mailing Address PO Box 29136	Amount of Each Disbursement this Period 1000.00
	City Portland State OR Zip Code 97296	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Contribution Candidate Name Jeff Merkley Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

B.	Full Name (Last, First, Middle Initial) Lifewise Health Plan of Washington	Transaction ID: D4977 Date of Disbursement 10 / 01 / 2008
	Mailing Address PO Box 91060	Amount of Each Disbursement this Period 222.00
	City Seattle State WA Zip Code 98111	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Health Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

C.	Full Name (Last, First, Middle Initial) MSR Media Strategies and Research	Transaction ID: D5007 Date of Disbursement 10 / 10 / 2008
	Mailing Address 1580 Lincoln Street Suite 510	Amount of Each Disbursement this Period 63840.00
	City Denver State CO Zip Code 80203	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Radio Buy Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

SUBTOTAL of Disbursements This Page (optional)	65062.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 19 / 26

<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)
Citizens to Elect Rick Larsen

A.	Full Name (Last, First, Middle Initial) National Democratic Club Mailing Address 30 Ivy St SE City Washington State DC Zip Code 20003-4006 Purpose of Disbursement Catering Candidate Name National Democratic Club Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D4997 Date of Disbursement 10 / 01 / 2008 Amount of Each Disbursement this Period 1169.76 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) National Rural Letter Carriers' Association Political Action Committee Mailing Address 1630 Duke Street 4th Floor City Alexandria State VA Zip Code 22314-3465 Purpose of Disbursement Catering and Room Rental Candidate Name National Rural Letter Carriers' Association Political Action Committee Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D5020 Date of Disbursement 10 / 02 / 2008 Amount of Each Disbursement this Period 386.38 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) William Schneeman Mailing Address PO Box 341 City Langley State WA Zip Code 98260 Purpose of Disbursement October Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D4979 Date of Disbursement 10 / 01 / 2008 Amount of Each Disbursement this Period 2192.12 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	3748.26
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)
Citizens to Elect Rick Larsen

A.	Full Name (Last, First, Middle Initial) William Schneeman Mailing Address PO Box 341 City Langley State WA Zip Code 98260 Purpose of Disbursement Mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D4981 Date of Disbursement 10 / 01 / 2008 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Jed Smart Mailing Address 405 E Hemmi Rd City Lynden State WA Zip Code 98264 Purpose of Disbursement October Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D4989 Date of Disbursement 10 / 01 / 2008 Amount of Each Disbursement this Period 2042.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Jed Smart Mailing Address 405 E Hemmi Rd City Lynden State WA Zip Code 98264 Purpose of Disbursement Mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D4991 Date of Disbursement 10 / 01 / 2008 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

3042.50

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
Citizens to Elect Rick Larsen

A.	Full Name (Last, First, Middle Initial) Sprint PCS	Transaction ID: D4993 Date of Disbursement 10 / 01 / 2008
	Mailing Address PO Box 79125	Amount of Each Disbursement this Period 232.25
	City State Zip Code City Of Industry CA 91716-9125	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Cell Phone Bill	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Starbucks Coffee Company	Transaction ID: D4985 Date of Disbursement 10 / 03 / 2008
	Mailing Address 2823 Colby Ave	Amount of Each Disbursement this Period 5.37
	City State Zip Code Everett WA 98201	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Coffee	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Starbucks Coffee Company	Transaction ID: D5013 Date of Disbursement 10 / 08 / 2008
	Mailing Address 2823 Colby Ave	Amount of Each Disbursement this Period 3.10
	City State Zip Code Everett WA 98201	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Coffee	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	240.72
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)
Citizens to Elect Rick Larsen

A.

Full Name (Last, First, Middle Initial)
Starbucks Coffee Company

Transaction ID: D5005

Date of Disbursement

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

Mailing Address 2823 Colby Ave

Amount of Each Disbursement this Period

6.73

City Everett State WA Zip Code 98201

Purpose of Disbursement
Coffee

Category/ Type

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Starbucks Coffee Company

Transaction ID: D5006

Date of Disbursement

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

Mailing Address 2823 Colby Ave

Amount of Each Disbursement this Period

4.83

City Everett State WA Zip Code 98201

Purpose of Disbursement
Coffee

Category/ Type

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Starbucks Coffee Company

Transaction ID: D5012

Date of Disbursement

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

Mailing Address 2823 Colby Ave

Amount of Each Disbursement this Period

3.69

City Everett State WA Zip Code 98201

Purpose of Disbursement
Coffee

Category/ Type

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

15.25

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)
Citizens to Elect Rick Larsen

A.	Full Name (Last, First, Middle Initial) Starbucks Coffee Company Mailing Address 2823 Colby Ave City Everett State WA Zip Code 98201 Purpose of Disbursement Coffee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D5017 Date of Disbursement 10 / 14 / 2008 Amount of Each Disbursement this Period 3.08 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Starbucks Coffee Company Mailing Address 2823 Colby Ave City Everett State WA Zip Code 98201 Purpose of Disbursement Coffee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D5024 Date of Disbursement 10 / 14 / 2008 Amount of Each Disbursement this Period 6.79 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) USPS Mailing Address Everett MPO City Everett State WA Zip Code 98201 Purpose of Disbursement PO Box Rental Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D5002 Date of Disbursement 10 / 07 / 2008 Amount of Each Disbursement this Period 85.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

94.87

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Citizens to Elect Rick Larsen

A.	Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 30001 City Inglewood State CA Zip Code 90313-0001 Purpose of Disbursement Conference Call Bill Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D4999 Date of Disbursement 10 / 01 / 2008 Amount of Each Disbursement this Period 205.13 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 30001 City Inglewood State CA Zip Code 90313-0001 Purpose of Disbursement Phone Bill Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D4994 Date of Disbursement 10 / 01 / 2008 Amount of Each Disbursement this Period 32.78 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 30001 City Inglewood State CA Zip Code 90313-0001 Purpose of Disbursement Phone Bill Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D4990 Date of Disbursement 10 / 01 / 2008 Amount of Each Disbursement this Period 700.05 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

937.96

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)
Citizens to Elect Rick Larsen

<p>A. Full Name (Last, First, Middle Initial) Washington Athletic Club</p> <p>Mailing Address 1325 Sixth Ave</p> <p>City Seattle State WA Zip Code 98101</p> <p>Purpose of Disbursement Catering</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D4998</p> <p>Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 729.45</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Washington State Ferries</p> <p>Mailing Address 2911 Second Ave</p> <p>City Seattle State WA Zip Code 98121</p> <p>Purpose of Disbursement Ferry Toll</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D5011</p> <p>Date of Disbursement 10 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 7.90</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Washington State Ferries</p> <p>Mailing Address 2911 Second Ave</p> <p>City Seattle State WA Zip Code 98121</p> <p>Purpose of Disbursement Ferry Toll</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: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D5026</p> <p>Date of Disbursement 10 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 3.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

741.30

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Citizens to Elect Rick Larsen

A.

Full Name (Last, First, Middle Initial)
Woodburn Company

Mailing Address 2815 Rockefeller Ave

City State Zip Code
Everett WA 98201-3524

Purpose of Disbursement
Copier Rental

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D4992

Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

431.85

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Fiorello Consulting

Mailing Address 3914 Barcroft Mews Court

City State Zip Code
Falls Church VA 22041

Purpose of Disbursement
Reimb. Catering

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D5000

Date of Disbursement

10 / 02 / 2008

Amount of Each Disbursement this Period

199.49

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

631.34

TOTAL This Period (last page this line number only)

166378.94