

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

BOB DINGETHAL FOR CONGRESS

ADDRESS (number and street) ▼

PO Box 668

Check if different than previously reported. (ACC)

Vancouver

WA

98666

2. **FEC IDENTIFICATION NUMBER** ▼

C C00553818

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

WA

03

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

(a) Quarterly Reports:

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

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

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

Election on / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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

Type or Print Name of Treasurer Marsha Manning

Signature of Treasurer Marsha Manning

[Electronically Filed]

Date

/ /

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

BOB DINGETHAL FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	40333.46	47717.80
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	40333.46	47717.80
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	31090.56	38023.29
(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)).....	31090.56	38023.29
8. Cash on Hand at Close of Reporting Period (from Line 27).....	12070.46	
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).....	2375.95	

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

BOB DINGETHAL FOR CONGRESS

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

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).....	28496.75	33546.75
(ii) Unitemized.....	10798.61	11423.61
(iii) TOTAL of contributions from individuals ▶	39295.36	44970.36
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	50.00	50.00
(d) The Candidate.....	988.10	2697.44
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	40333.46	47717.80
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	2375.95
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	2375.95
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)..... ▶	40333.46	50093.75

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	31090.56	38023.29
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	0.00
(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	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	31090.56	38023.29

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2827.56
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	40333.46
25. SUBTOTAL (add Line 23 and Line 24).....	43161.02
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	31090.56
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	12070.46

**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 5 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Peter D Aller

Mailing Address 3801 NE 172nd Ave

City Vancouver State WA Zip Code 98682

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
205.91

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 30 / 2014

Transaction ID : SA11AI.4490

Amount of Each Receipt this Period
162.30

In-kind - Food for hospitality suite

B. Full Name (Last, First, Middle Initial)
Baird for Congress

Mailing Address PO Box 5016

City Vancouver State WA Zip Code 98668

FEC ID number of contributing federal political committee. **C** C00310904

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.4797

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Will Bloch

Mailing Address 75 El Camino Real

City White Salmon State WA Zip Code 98672

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

Name of Employer none Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 07 / 2014

Transaction ID : SA11AI.4195

Amount of Each Receipt this Period
1000.00

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

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

3162.30

**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 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Candy Bonneville Jr.

Mailing Address 308 NW 25th PI

City State Zip Code
Battle Ground WA 98604

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

Name of Employer Occupation
None Unemployed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
464.45

Date of Receipt
 M M / D D / Y Y Y Y
01 / 31 / 2014

Transaction ID : SA11AI.4505

Amount of Each Receipt this Period
464.45
 In-kind - Food for hospitality suite @state meeting

B. Full Name (Last, First, Middle Initial)
Candy Bonneville Jr.

Mailing Address 308 NW 25th PI

City State Zip Code
Battle Ground WA 98604

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

Name of Employer Occupation
None Unemployed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
514.45

Date of Receipt
 M M / D D / Y Y Y Y
02 / 05 / 2014

Transaction ID : SA11AI.4518

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Candy Bonneville Jr.

Mailing Address 308 NW 25th PI

City State Zip Code
Battle Ground WA 98604

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

Name of Employer Occupation
None Unemployed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
539.45

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.4773

Amount of Each Receipt this Period
25.00

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

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

539.45

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Carolyn A Brock

Mailing Address 893 Middle Fork Rd

City Onolaska State WA Zip Code 98570

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2014

Transaction ID : SA11AI.4237

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Matthew A Brock

Mailing Address 893 Middle Fork Rd

City Onolaska State WA Zip Code 98570

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

Name of Employer Boeing Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2014

Transaction ID : SA11AI.4235

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Jill Campbell

Mailing Address 8918 NE 40th Pl

City Vancouver State WA Zip Code 98665

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

Name of Employer None Occupation Unemployed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

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

Transaction ID : SA11AI.4500

Amount of Each Receipt this Period
700.00
In-kind - 2 used computers

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

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

Mailing Address 3800 NE 160th Ave

City Vancouver State WA Zip Code 98682

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

Name of Employer SEIU Occupation Homecare Giver

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 03 / 2014

Transaction ID : SA11AI.4510

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Robert Chu

Mailing Address 3800 NE 160th Ave

City Vancouver State WA Zip Code 98682

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

Name of Employer SEIU Occupation Homecare Giver

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.4703

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Robert L Cohen

Mailing Address 13320 NE 42nd Ave

City Vancouver State WA Zip Code 98686

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 02 / 2014

Transaction ID : SA11AI.4669

Amount of Each Receipt this Period
 250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Greg Flakus		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 15 / 2014
Mailing Address 13111 NE 5th Ave		Transaction ID : SA11AI.4731
City Vancouver	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer GF Strategies	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Isodoras Garifalakis		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014
Mailing Address 1708 NW Gregory Dr		Transaction ID : SA11AI.4484
City Vancouver	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00 In-kind - Office Rent
Name of Employer Omega Industries	Occupation Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100.00	

Full Name (Last, First, Middle Initial) C. Maria Garifalakis		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014
Mailing Address 1708 NW Gregory Dr		Transaction ID : SA11AI.4487
City Vancouver	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00 In-kind - Office rent
Name of Employer Maria's Properties	Occupation Real Estate	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100.00	

SUBTOTAL of Receipts This Page (optional).....	1150.00
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 10 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Rifat K Haffar

Mailing Address Kinderspitalgasse 1/10

City Vienna State ZZ Zip Code 01001

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 14 / 2014

Transaction ID : SA11AI.4422

Amount of Each Receipt this Period
 500.00

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

Mailing Address 10006 NE 36th Ct

City Vancouver State WA Zip Code 98686

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

Name of Employer Self Occupation Writer-Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 30 / 2014

Transaction ID : SA11AI.4875

Amount of Each Receipt this Period
 1045.00
 In-kind - Research & writing

C. Full Name (Last, First, Middle Initial)
Paul L Henderson

Mailing Address 900 Washington St, Ste 1020

City Vancouver State WA Zip Code 98660

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

Name of Employer Henderson Law Firm PLLC Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11AI.4759

Amount of Each Receipt this Period
 250.00

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

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

1795.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.4422

Rifat Haffar is currently living out of the country, but is a citizen of the United States. He has provided a copy of his US passport as proof of US citizenship.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Paul Holmes

Mailing Address 11300 NW 34th Ave

City Vancouver State WA Zip Code 98685

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 14 / 2014

Transaction ID : SA11AI.4712

Amount of Each Receipt this Period
 2400.00

B. Full Name (Last, First, Middle Initial)
Martha Howe

Mailing Address 514 E 28th St

City Vancouver State WA Zip Code 98663-3021

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

Name of Employer Technoloft, Inc Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 26 / 2014

Transaction ID : SA11AI.4311

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Karen Hunt

Mailing Address 8002 NE 71st Loop

City Vancouver State WA Zip Code 98662

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 25 / 2014

Transaction ID : SA11AI.4594

Amount of Each Receipt this Period
 500.00

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

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

3400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

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

Mailing Address 8002 NE 71st Loop

City Vancouver State WA Zip Code 98662

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

Name of Employer: Hunt Communications Occupation: Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 25 / 2014

Transaction ID : SA11AI.4592

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Brian Kline

Mailing Address 4000 NE 128th St

City Vancouver State WA Zip Code 98686

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

Name of Employer: Klineco Enterprises Occupation: Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 26 / 2014

Transaction ID : SA11AI.4258

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Veronica Kline

Mailing Address 4000 NE 128th St

City Vancouver State WA Zip Code 98686

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

Name of Employer: None Occupation: Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 26 / 2014

Transaction ID : SA11AI.4256

Amount of Each Receipt this Period
 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

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

Mailing Address 11611 NW 43rd Ct

City Vancouver State WA Zip Code 98685

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 05 / 2014

Transaction ID : SA11AI.4516

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Gimi Larsen

Mailing Address 18103 SE 16th St

City Vancouver State WA Zip Code 98683

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : SA11AI.4871

Amount of Each Receipt this Period
 2500.00

In-kind - Research 50 hrs @\$100/hr

C. Full Name (Last, First, Middle Initial)
Gimi Larsen

Mailing Address 18103 SE 16th St

City Vancouver State WA Zip Code 98683

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : SA11AI.5414

Amount of Each Receipt this Period
 2500.00

In-kind - Research

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

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

Mailing Address 14516 NW 20th Ave

City Vancouver State WA Zip Code 98685

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

Name of Employer Automated Data Processing Occupation Systems Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 03 / 2014

Transaction ID : SA11AI.4537

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Marsha Manning

Mailing Address 3801 NE 172nd Ave

City Vancouver State WA Zip Code 98682

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

Name of Employer Self Occupation Accounting & Consulting

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.4869

Amount of Each Receipt this Period
900.00
In-kind - Treasurer work

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

Mailing Address 7410 NW 16th Ave

City Vancouver State WA Zip Code 98665

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

Name of Employer Currie & McLain P.S. Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11AI.4757

Amount of Each Receipt this Period
250.00

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

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

1400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

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

Mailing Address 310 W 34th St

City Vancouver State WA Zip Code 98660

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

Name of Employer Baumgartner Nelson & Wagner Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 01 / 2014

Transaction ID : SA11AI.4512

Amount of Each Receipt this Period
250.00

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

Mailing Address 4418 NE 179th St

City Vancouver State WA Zip Code 98686

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

Name of Employer Hoesly Eco Auto Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 06 / 2014

Transaction ID : SA11AI.4193

Amount of Each Receipt this Period
500.00

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

Mailing Address 4418 NE 179th St

City Vancouver State WA Zip Code 98686

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

Name of Employer Mary's Bookkeeping Service Occupation Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 06 / 2014

Transaction ID : SA11AI.4191

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ann Palenshus

Mailing Address 17111 NW 69th Ave

City Ridgefield	State WA	Zip Code 98642
--------------------	-------------	-------------------

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

Name of Employer Bubba Blue BBQ	Occupation Owner
------------------------------------	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 20 / 2014

Transaction ID : SA11AI.4579

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
David Palenshus

Mailing Address 17111 NW 69th Ave

City Ridgefield	State WA	Zip Code 98642
--------------------	-------------	-------------------

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

Name of Employer Bubba Blue BBQ	Occupation Owner
------------------------------------	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 20 / 2014

Transaction ID : SA11AI.4581

Amount of Each Receipt this Period
500.00

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

Mailing Address 6405 NW 170th Cir

City Ridgefield	State WA	Zip Code 98642
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FEC ID number of contributing federal political committee. **C**

Name of Employer Compas Oncology	Occupation Physician
-------------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.4785

Amount of Each Receipt this Period
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Julie E Smith

Mailing Address 6405 NW 170th Cir

City State Zip Code
Ridgefield WA 98642

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

Name of Employer Occupation
None Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.4787

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Karen Snyder

Mailing Address PO Box 131

City State Zip Code
Long Beach WA 98631

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

Name of Employer Occupation
Anna Lena's Inc Designer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2014

Transaction ID : SA11AI.4671

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ty Stober

Mailing Address 514 W 23rd St

City State Zip Code
Vancouver WA 98660

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

Name of Employer Occupation
NEEA Initiative Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.4514

Amount of Each Receipt this Period
250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

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

Mailing Address 3860 Cameron Dr NE

City Lacey	State WA	Zip Code 98516
---------------	-------------	-------------------

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

Name of Employer None	Occupation Retired
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 30 / 2014

Transaction ID : SA11AI.4812

Amount of Each Receipt this Period

250.00

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

Mailing Address 18809 SE 17th St

City Vancouver	State WA	Zip Code 98683
-------------------	-------------	-------------------

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

Name of Employer Daimler Trucks North America	Occupation Engineer
--	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 26 / 2014

Transaction ID : SA11AI.4250

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Suzanne Turnauer

Mailing Address 18809 SE 17th St

City Vancouver	State WA	Zip Code 98683
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Homemaker
--------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 26 / 2014

Transaction ID : SA11AI.4252

Amount of Each Receipt this Period

250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 47
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

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

Mailing Address 110 Krestview Lane

City Woodland State WA Zip Code 98674

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

Name of Employer WTB, Inc Occupation Construction

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.4843

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
David Walsh

Mailing Address 5280 NE 28th Ave

City Ft Lauderdale State FL Zip Code 33308

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

Name of Employer Kayne Anderson Capital Advisor Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11AI.4761

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 17717 NW 56th Ave

City Ridgefield State WA Zip Code 98642

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

Name of Employer Hoffman Construction Occupation Estimator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11AI.4735

Amount of Each Receipt this Period
 250.00

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

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

3350.00

28496.75

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 21 OF 47	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Clark County Democratic Womens Club

Mailing Address 5320 NE 81st Ave
#484

City Vancouver State WA Zip Code 98662

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 26 / 2014

Transaction ID : SA11C.4325

Amount of Each Receipt this Period
50.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

50.00

50.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 47
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert E Dingethal

Mailing Address **17811 NW 56TH AVE**

City **RIDGEFIELD** State **WA** Zip Code **98642**

FEC ID number of contributing federal political committee. **C H4WA03114**

Name of Employer **None** Occupation **Candidate**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2697.44

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2014

Transaction ID : SA11D.6941

Amount of Each Receipt this Period
988.10

In-kind - Bob - early support travel, mtgs, setup

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

988.10

988.10

**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 23 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Peter D Aller		Date of Disbursement MM / DD / YYYY 01 / 30 / 2014
Mailing Address 3801 NE 172nd Ave		Amount of Each Disbursement this Period 162.30 Transaction ID : SB17.4493
City Vancouver	State WA	
Purpose of Disbursement In-kind - Food for hospitality suite		Category/ Type 007
Candidate Name BOB DINGETHAL FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

Full Name (Last, First, Middle Initial) B. Ande, Nick		Date of Disbursement MM / DD / YYYY 01 / 13 / 2014
Mailing Address 3614 V St		Amount of Each Disbursement this Period 241.36 Transaction ID : SB17.4400 [MEMO ITEM]
City Vancouver	State WA	
Purpose of Disbursement mileage to county meetings		Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) c. Ande, Nick		Date of Disbursement MM / DD / YYYY 01 / 28 / 2014
Mailing Address 3614 V St		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.4402 [MEMO ITEM]
City Vancouver	State WA	
Purpose of Disbursement campaign phone		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	162.30
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)		PAGE 24 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Blind Onion		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 9230 NE Hwy 99		Amount of Each Disbursement this Period 18.58
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6372 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 003		

Full Name (Last, First, Middle Initial) B. Candy Bonneville Jr.		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 308 NW 25th Pl		Amount of Each Disbursement this Period 464.45
City Battle Ground State WA Zip Code 98604	Purpose of Disbursement In-kind - Food for hospitality suite @state meeting	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.4508
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 007		

Full Name (Last, First, Middle Initial) c. Bubba Blue BBQ		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 17111 NW 69th Ave		Amount of Each Disbursement this Period 1110.60
City Ridgefield State WA Zip Code 98642	Purpose of Disbursement Food for campaign kickoff	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.4618
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 007		

SUBTOTAL of Disbursements This Page (optional).....	1575.05
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 25 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jill Campbell		Date of Disbursement MM / DD / YYYY 03 / 03 / 2014
Mailing Address 8918 NE 40th Pl		Amount of Each Disbursement this Period 700.00 Transaction ID : SB17.4502
City Vancouver	State WA	
Purpose of Disbursement In-kind - 2 used computers		Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) B. Capitol Campus Parking		Date of Disbursement MM / DD / YYYY 01 / 24 / 2014
Mailing Address 103 Sid Snyder Ave SW		Amount of Each Disbursement this Period 6.00 Transaction ID : SB17.6393 [MEMO ITEM]
City Olympia	State WA	
Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup		Category/ Type 002
Candidate Name BOB DINGETHAL FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) c. Columbia Litho, Inc		Date of Disbursement MM / DD / YYYY 03 / 03 / 2014
Mailing Address 302 NE Sxth Ave		Amount of Each Disbursement this Period 1055.81 Transaction ID : SB17.4631
City Camas	State WA	
Purpose of Disbursement Printing - remits & envelopes		Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

SUBTOTAL of Disbursements This Page (optional).....	1755.81
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Costco		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 19610 SE 1St		Amount of Each Disbursement this Period 988.10
City Camas State WA Zip Code 98607	Purpose of Disbursement Aller reimburse for event food	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6394 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Costco-Padden		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 6720 NE 84th St		Amount of Each Disbursement this Period 464.45
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Bonneville reimburse for event food	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6396 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Robert E Dingethal		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2014
Mailing Address 17811 NW 56TH AVE		Amount of Each Disbursement this Period 988.10
City RIDGEFIELD State WA Zip Code 98642	Purpose of Disbursement In-kind - Bob - early support travel, mtgs, setup	
Candidate Name		Transaction ID : SB17.6942
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	988.10
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 27 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Federal Election Commission		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 999 E Street NW		Amount of Each Disbursement this Period 105.00
City Washington State DC Zip Code 20463	Purpose of Disbursement FEC Training (2)	Transaction ID : SB17.4658
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 001	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. FedEx Office		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 1605 NE 7th Ave		Amount of Each Disbursement this Period 20.30
City Portland State OR Zip Code 97232	Purpose of Disbursement Printing services	Transaction ID : SB17.4407
Candidate Name	Category/Type 006	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Isodoras Garifalakis		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 1708 NW Gregory Dr		Amount of Each Disbursement this Period 450.00
City Vancouver State WA Zip Code 98665	Purpose of Disbursement In-kind - Office Rent	Transaction ID : SB17.4486
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	450.00
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 28 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Maria Garifalakis		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 1708 NW Gregory Dr		Amount of Each Disbursement this Period 450.00 Transaction ID : SB17.4489
City Vancouver	State WA	
Zip Code 98665-6004	Purpose of Disbursement In-kind - Office rent	Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

Full Name (Last, First, Middle Initial) B. Peter Harrison		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2014
Mailing Address 10006 NE 36th Ct		Amount of Each Disbursement this Period 1045.00 Transaction ID : SB17.4877
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement In-kind - Research & writing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Hennis Kitchen		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 120 E Jewett St		Amount of Each Disbursement this Period 29.00 Transaction ID : SB17.6366 [MEMO ITEM]
City White Salmon	State WA	
Zip Code 98672	Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup	Category/ Type 003
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

SUBTOTAL of Disbursements This Page (optional).....	1495.00
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 29 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Hilton Hotel		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 301 W 6th St		Amount of Each Disbursement this Period 116.82
City Vancouver	State WA	
Purpose of Disbursement Hospitality suite	Category/ Type 007	Transaction ID : SB17.4661 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03		

Full Name (Last, First, Middle Initial) B. Gimi Larsen		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 18103 SE 16th St		Amount of Each Disbursement this Period 2500.00
City Vancouver	State WA	
Purpose of Disbursement In-kind - Research 50 hrs @\$100/hr	Category/ Type	Transaction ID : SB17.4873
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. Gimi Larsen		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 18103 SE 16th St		Amount of Each Disbursement this Period 2500.00
City Vancouver	State WA	
Purpose of Disbursement In-kind - Research	Category/ Type	Transaction ID : SB17.5415
Candidate Name	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5000.00
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 30 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Marsha Manning		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 3801 NE 172nd Ave		Amount of Each Disbursement this Period 349.30 Transaction ID : SB17.4656
City Vancouver	State WA	
Purpose of Disbursement Reimburse misc expense	Category/ Type 001	
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: WA	District: 03	

Full Name (Last, First, Middle Initial) B. Marsha Manning		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 3801 NE 172nd Ave		Amount of Each Disbursement this Period 900.00 Transaction ID : SB17.4870
City Vancouver	State WA	
Purpose of Disbursement In-kind - Treasurer work	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial) c. Name Badges		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 12260 SW 53rd St, Ste 601		Amount of Each Disbursement this Period 33.65 Transaction ID : SB17.6398 [MEMO ITEM]
City Cooper City	State FL	
Purpose of Disbursement Aller reimburse for name badges	Category/ Type 001	
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: WA	District: 03	

SUBTOTAL of Disbursements This Page (optional).....	1249.30
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)	PAGE 31 OF 47			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 000,000.00 105.38
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6381 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Office Max		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 7601 NE Vancouver Plaza		Amount of Each Disbursement this Period 000,000.00 127.48
City Vancouver State WA Zip Code 98662	Purpose of Disbursement Misc office supplies	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.4663 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03	Category/Type 001	

Full Name (Last, First, Middle Initial) c. Pacific Rental		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 12814 NE Hwy 99		Amount of Each Disbursement this Period 000,000.00 71.54
City Vancouver State WA Zip Code 98686	Purpose of Disbursement sound system rental	
Candidate Name		Transaction ID : SB17.4403 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 007	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rapid Refill		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 308 E Mill Plain Blvd		Amount of Each Disbursement this Period 14.08
City Vancouver	State WA Zip Code 98660	
Purpose of Disbursement Printer ink	Category/Type 001	Transaction ID : SB17.4405 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Staples		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014
Mailing Address 1760 N Jantzen Bech Ctr Dr		Amount of Each Disbursement this Period 14.99
City Portland	State OR Zip Code 97217	
Purpose of Disbursement Office supplies	Category/Type	Transaction ID : SB17.4409 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Couve Group		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 601 Main St, Ste 209		Amount of Each Disbursement this Period 2500.00
City Vancouver	State WA Zip Code 98660	
Purpose of Disbursement Campaign Mgr payroll	Category/Type 001	Transaction ID : SB17.4388
Candidate Name BOB DINGETHAL FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

SUBTOTAL of Disbursements This Page (optional).....	2500.00
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 33 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. The Couve Group		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 601 Main St, Ste 209		Amount of Each Disbursement this Period 412.27 Transaction ID : SB17.4399
City Vancouver State WA Zip Code 98660	Purpose of Disbursement Reimbursement - see memos 001 Category/Type	
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) B. The Couve Group		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 601 Main St, Ste 209		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.4411
City Vancouver State WA Zip Code 98660	Purpose of Disbursement Campaign mgr payroll 001 Category/Type	
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) c. The Couve Group		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014
Mailing Address 601 Main St, Ste 209		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.4614
City Vancouver State WA Zip Code 98660	Purpose of Disbursement Campaign mgr salary 001 Category/Type	
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

SUBTOTAL of Disbursements This Page (optional).....	5412.27
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 34 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. The Couve Group		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 601 Main St, Ste 209		Amount of Each Disbursement this Period 2550.00 Transaction ID : SB17.4626
City Vancouver	State WA	
Zip Code 98660	Purpose of Disbursement Mgr salary & phone	Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

Full Name (Last, First, Middle Initial) B. The Couve Group		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 601 Main St, Ste 209		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.4644
City Vancouver	State WA	
Zip Code 98660	Purpose of Disbursement Campaign Mgr payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. The Couve Group		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 601 Main St, Ste 209		Amount of Each Disbursement this Period 2607.52 Transaction ID : SB17.4654
City Vancouver	State WA	
Zip Code 98660	Purpose of Disbursement Payroll & mileage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7657.52
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 47			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. The Couve Group		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 601 Main St, Ste 209		Amount of Each Disbursement this Period 107.52
City Vancouver	State WA Zip Code 98660	
Purpose of Disbursement Mileage	Category/Type 002	Transaction ID : SB17.4655 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Total Merchant Concepts, Inc		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 12300 NE Fourth Plain Blvd		Amount of Each Disbursement this Period 191.71
City Vancouver	State WA Zip Code 98682	
Purpose of Disbursement PayTrace setup & card reader	Category/Type 003	Transaction ID : SB17.4394
Candidate Name BOB DINGETHAL FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) c. Total Merchant Concepts, Inc		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 12300 NE Fourth Plain Blvd		Amount of Each Disbursement this Period 61.12
City Vancouver	State WA Zip Code 98682	
Purpose of Disbursement Credit Card processing	Category/Type 003	Transaction ID : SB17.4606
Candidate Name BOB DINGETHAL FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

SUBTOTAL of Disbursements This Page (optional).....	252.83
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 36 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Total Merchant Concepts, Inc		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address 12300 NE Fourth Plain Blvd		Amount of Each Disbursement this Period 445.76 Transaction ID : SB17.4635
City Vancouver	State WA	
Zip Code 98682	Purpose of Disbursement CC Transaction fees	Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 1211 Daniels St		Amount of Each Disbursement this Period 105.05 Transaction ID : SB17.4640
City Vancouver	State WA	
Zip Code 98666	Purpose of Disbursement Postage	Category/ Type 003
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 1211 Daniels St		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.4650
City Vancouver	State WA	
Zip Code 98666	Purpose of Disbursement Postage	Category/ Type 003
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

SUBTOTAL of Disbursements This Page (optional).....	445.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 47	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 1211 Daniels St		Amount of Each Disbursement this Period 242.02
City Vancouver State WA Zip Code 98666	Purpose of Disbursement Postage 003 Category/Type	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.4653
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	242.02
TOTAL This Period (last page this line number only).....	29185.96

**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 38 OF 47			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Arcadia Court Hotel		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2014
Mailing Address 405 Ocean Beach Blvd		Amount of Each Disbursement this Period 60.94
City Long Beach State WA Zip Code 98631	Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup	Transaction ID : SB21.6386
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 002	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Best Buy		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2014
Mailing Address 8700 NE Vancouver Mall Dr #147		Amount of Each Disbursement this Period 43.35
City Vancouver State WA Zip Code 98662	Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup - phone	Transaction ID : SB21.6388
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 001	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Boppin Bo's		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2014
Mailing Address 7809 NE Vancouver Plaza Dr #110		Amount of Each Disbursement this Period 10.26
City Vancouver State WA Zip Code 98662	Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup	Transaction ID : SB21.6384
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 003	[MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 47			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City of Portland		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 1120 SW Fifth Ave, Ste 800		Amount of Each Disbursement this Period 2.40
City Portland	State OR	
Zip Code 97204	Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup	Transaction ID : SB21.6391 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) B. Hazel Dell/Salmon Creek Business Association		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address 8800 NE Hazel Dell Ave		Amount of Each Disbursement this Period 10.00
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup	Transaction ID : SB21.6383 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) c. Hazel Dell Car Wash		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 6200 NE Hwy 99		Amount of Each Disbursement this Period 46.10
City Vancouver	State WA	
Zip Code 98685	Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup	Transaction ID : SB21.6375 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 47			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Hilton Hotel		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2014
Mailing Address 301 W 6th St		Amount of Each Disbursement this Period 29.00
City Vancouver	State WA	
Zip Code 98660	Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup	Transaction ID : SB21.6377 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

Full Name (Last, First, Middle Initial) B. Home Depot		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 8601 NE Andresen Rd		Amount of Each Disbursement this Period 102.67
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup	Transaction ID : SB21.6380 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

Full Name (Last, First, Middle Initial) c. Peachtree		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 6600 NW Hwy 99		Amount of Each Disbursement this Period 49.00
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup	Transaction ID : SB21.6369 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 47
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Peachtree		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 6600 NW Hwy 99		Amount of Each Disbursement this Period 12.00
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup	Transaction ID : SB21.6376 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

Full Name (Last, First, Middle Initial) B. Peachtree		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 6600 NW Hwy 99		Amount of Each Disbursement this Period 13.00
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup	Transaction ID : SB21.6378 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

Full Name (Last, First, Middle Initial) c. Peets Coffee		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 13307 NE Hwy 99 Ste 115		Amount of Each Disbursement this Period 7.21
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement Bob In-kind - early support mtgs, travel, setup	Transaction ID : SB21.6368 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 47			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Planet Thai		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 910 NE Tenney Rd		Amount of Each Disbursement this Period 33.00
City Vancouver State WA Zip Code 98685	Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB21.6370 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Provecho Mexican Grill		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 1801 Main St		Amount of Each Disbursement this Period 30.00
City Vancouver State WA Zip Code 98660	Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB21.6390 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Safeway		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 13023 NE Hwy 99		Amount of Each Disbursement this Period 39.12
City Vancouver State WA Zip Code 98686	Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB21.6367 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 47			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Safeway		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 13023 NE Hwy 99		Amount of Each Disbursement this Period 46.77
City Vancouver State WA Zip Code 98686	Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB21.6387 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03	Category/Type 002	

Full Name (Last, First, Middle Initial) B. Safeway-Woodland		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 725 Pacific Ave		Amount of Each Disbursement this Period 44.98
City Woodland State WA Zip Code 98674	Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB21.6373 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03	Category/Type 002	

Full Name (Last, First, Middle Initial) c. Seaview Shell		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2014
Mailing Address 39th & Pacific Hwy		Amount of Each Disbursement this Period 3.12
City Seaview State WA Zip Code 98644	Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB21.6385 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03	Category/Type 002	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 47	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 1211 Daniels St		Amount of Each Disbursement this Period 17.96
City Vancouver State WA Zip Code 98666	Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB21.6389 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03	Category/Type 001	

Full Name (Last, First, Middle Initial) B. Walmart		Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2014
Mailing Address 9000 NE Hwy 99		Amount of Each Disbursement this Period 99.26
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB21.6379 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03	Category/Type 001	

Full Name (Last, First, Middle Initial) c. Willems on Main		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2014
Mailing Address 907 Main St		Amount of Each Disbursement this Period 129.00
City Vancouver State WA Zip Code 98660	Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB21.6382 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03	Category/Type 003	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	0.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **BOB DINGETHAL FOR CONGRESS** Transaction ID : **SC/10.4131**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2014
BOB E DINGETHAL Primary
 Mailing Address 17811 NW 56TH AVE General
 Other (specify) ▼

City State ZIP Code
 RIDGEFIELD WA 98642

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
175.95	0.00	175.95

TERMS Date Incurred Date Due Interest Rate Secured:
 M 11 / D 14 / Y 2013 M M / D D / Y 11/1/2014 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 175.95
TOTALS This Period (last page in this line only)..... ▶ []
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4130

BOB DINGETHAL FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

BOB E DINGETHAL

Primary
 General
 Other (specify) ▼

Mailing Address
17811 NW 56TH AVE

City State ZIP Code
RIDGEFIELD WA 98642

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
2000.00 0.00 2000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 12 / D 02 / Y 2013 M M / D D / Y 11/1/2014 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 2000.00
TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **BOB DINGETHAL FOR CONGRESS** Transaction ID : **SC/10.4150**

LOAN SOURCE Full Name (Last, First, Middle Initial) BOB E DINGETHAL	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 17811 NW 56TH AVE		

City	State	ZIP Code
RIDGEFIELD	WA	98642

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200.00	0.00	200.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	M 12 / D 20 / Y 2013	M / D / Y 11/1/2014	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	200.00
TOTALS This Period (last page in this line only).....	▶	2375.95

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.