PAGE 1 / 38

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An	Authorized Cor	nmittee			Office Use Only
NAME OF COMMITTEE (in f	TYPE OR PRI		example: If typing ver the lines.	g, type	12FE4M5	
Moore for Alask	ka					
ADDRESS (number and	I street)	OR ROAD				
	PMB 1117					
Check if different than previous reported. (AC	sly Anchorage				AK !	99507
2. FEC IDENTIFICA	ATION NUMBER ▼	CITY ▲			STATE A	ZIP CODE A STATE ▼ DISTRICT
C C00520544		3. IS THIS REPORT	× NEW	OR	AMEND (A)	
4. TYPE OF REP	ORT (Choose One)					
(a) Quarterly Re	,	(b) 12-Day PR	E-Election Repo	ort for the:		_
X April 15	Quarterly Report (Q1)		Primary (12P)	General (1	2G) Runoff (12R)
			Convention (12C)	Special (1	2S)
July 15 (Quarterly Report (Q2)		M · M	D D /	V V V V	is the
October	15 Quarterly Report (Q3)	Election o	n limit /			in the State of
January	31 Year-End Report (YE)	(c) 30-Day PO	ST-Election Rep	oort for the:		
			General (30G	i)	Runoff (30	OR) Special (30S)
Terminati	ion Report (TER)		Testinal .	-		is the
		Election of	n/	D D /	Y " Y " Y " Y	in the State of
5. Covering Period	M M / D D D 01	/ Y Y Y Y 2014	through	M M M 03	31	Y Y Y Y Y 2014
I certify that I have ex	ramined this Report and	to the best of my l	knowledge and	belief it is tr	ue, correct and	l complete.
Type or Print Name of	f Treasurer MICHELE V	/asquez				
Signature of Treasurer	MICHELE Vasquez		[Electronically I	Filed] [Date 04	/ 14 / Y Y Y Y Y Y Y 2014
NOTE: Submission of fa	alse, erroneous, or incomp	olete information may	y subject the per	son_signing t	this Report to th	ne penalties of 2 U.S.C. §437g.
Office						
Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

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Write or Type Committee Name

Moore for	· Alaska
-----------	----------

01 03 31 2014 01 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 3935.00 17296.50 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 3935.00 17296.50 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 17718.27 53061.43 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 17718.27 53061.43 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 2893.07 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 41250.00 Schedule C and/or Schedule D).....

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)

PAGE 3 / 38

Write or Type Committee Name

Moore for Alaska

01 2014 03 31 2014 Report Covering the Period: From: To:

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. C	ONTRIBUTIONS (other than loans) FROM:		
(a)	Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	2010.00	7560.00
	(ii) Unitemized	1925.00	9736.50
	(iii) TOTAL of contributions from individuals	3935.00	17296.50
(b)		0.00	0.00
(c)	(such as PACs)	0.00	0.00
(d)	TOTAL CONTRIBUTIONS	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	3935.00	17296.50
	RANSFERS FROM OTHER JTHORIZED COMMITTEES	0.00	0.00
	DANS:) Made or Guaranteed by the		
(a)	Candidate	0.00	0.00
(b)	,	15150.00	41250.00
(c)) TOTAL LOANS (add Lines 13(a) and (b))	15150.00	41250.00
ΕX	FFSETS TO OPERATING KPENDITURES	0.00	
(R	efunds, Rebates, etc.)	0.00	0.00
	THER RECEIPTS vividends, Interest, etc.)	0.00	8.00
11	OTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) tarry Total to Line 24, page 4)	19085.00	58554.50

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 38

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	17718.27	53061.43
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
	man Folitical Committees		
	(b) Political Party Committees(c) Other Political 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	3000.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	17718.27	56061.43
	III. CASH S	SUMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	ORTING PERIOD	1526.34
24	TOTAL RECEIPTS THIS PERIOD (from Line	e 16, page 3)	19085.00
5.	SUBTOTAL (add Line 23 and Line 24)		20611.34
6.	TOTAL DISBURSEMENTS THIS PERIOD (fr	rom Line 22)	17718.27
	CASH ON HAND AT CLOSE OF REPORTIN		2893.07

FOR LINE NUMBER: **PAGE** 5 OF 38 (check only one) 11a 11b 11d 11c 12 13a 13b 14

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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) Moore for Alaska Full Name (Last, First, Middle Initial) Kevin Kerr Date of Receipt Mailing Address 2941 Wentworth St 2014 07 City State Zip Code Transaction ID: VN8V1BWQYJ7 ΑK 99508-4341 Anchorage FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Self Accountant Receipt For: 2013 Election Cycle-to-Date Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Carolyn H Covington Date of Receipt Mailing Address 3350 N Clark Wolverine Rd 09 2014 City State Zip Code Transaction ID: VN8V1BWNF97 Palmer AK 99645-8707 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 50.00 Name of Employer Occupation Teacher Retired Receipt For: 2014 Election Cycle-to-Date | Primary General 200.00 Other (specify) Full Name (Last, First, Middle Initial) Joe Josephson Date of Receipt Mailing Address 1526 F St 2014 17 City State Zip Code Transaction ID: VN8V1C22KN2 AK Anchorage 99501-5030 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 160.00 Name of Employer Occupation Self Attorney Receipt For: 2013 Election Cycle-to-Date | Yrimary General Other (specify) 260.00 710.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

C.

SCHEDULE A (FEC Form 3)

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

FOR LINE	NUMBER:	PAGE	6	OF	38	
(check only one)						
X _{11a}	11b	11c	11	d		
12	13a	13b	14	. 「	15	

ITEMIZED RECEIPTS 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) Moore for Alaska Full Name (Last, First, Middle Initial) Kirk A Hogenson Date of Receipt Mailing Address 2056 Sun Valley Ct 2014 23 City State Zip Code Transaction ID: VN8V1C2KN07 ΑK 99709-7400 Fairbanks FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 300.00 Name of Employer Occupation Programmer University of Alaska Receipt For: 2014 Election Cycle-to-Date Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) Matthew J Schnellbaecher Date of Receipt Mailing Address 7100 Montagne Cir 30 2014 City State Zip Code Transaction ID: VN8V1C3R8E2 Anchorage AK 99507-1283 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation **CADIOLOGIST ANMC** Receipt For: 2014 Election Cycle-to-Date Primary General 250.00 Other (specify)

Full Name (Last, First, Middle Initial)		
Thomas E Schulz		Date of Receipt
Mailing Address 715 Miller Ridge Rd City	State Zip Code	01 30 / Y Y Y Y Y
Ketchikan	AK 99901-6361	Transaction ID : VN8V1C3PHT9
FEC ID number of contributing federal political committee. Name of Employer	Occupation	Amount of Each Receipt this Period 50.00
Self	Attorney at Law	
Receipt For: 2014 Primary General Other (specify)	Election Cycle-to-Date 200.00	
	·	

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

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

600.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) 11a 11b 11d 11c 12

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for each category of the Detailed Summary Page 13a 13b 14 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) Moore for Alaska Full Name (Last, First, Middle Initial) Lonnie Brown Date of Receipt Mailing Address 9939 Middlerock Rd 2014 09 City State Zip Code Transaction ID: VN8V1C6X0S8 ΑK 99507-1287 Anchorage FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Municipality of anchorage police officer Receipt For: 2014 Election Cycle-to-Date | Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Carolyn H Covington Date of Receipt Mailing Address 3350 N Clark Wolverine Rd 09 2014 City State Zip Code Transaction ID: VN8V1C6X1C8 Palmer AK 99645-8707 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 50.00 Name of Employer Occupation Teacher Retired Receipt For: 2014 Election Cycle-to-Date | Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Thomas E Schulz Date of Receipt Mailing Address 715 Miller Ridge Rd 2014 28 City State Zip Code Transaction ID: VN8V1CAGH36 AK Ketchikan 99901-6361 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 50.00 Name of Employer Occupation Self Attorney at Law Receipt For: 2014 Election Cycle-to-Date Primary General Other (specify) 250.00 600.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** (check only one) 11a 11b 11c

8 OF

38

Use separate schedule(s) for each category of the 11d Detailed Summary Page 12 13a 13b 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) Moore for Alaska Full Name (Last, First, Middle Initial) Carolyn H Covington Date of Receipt Mailing Address 3350 N Clark Wolverine Rd 03 2014 09 City State Zip Code Transaction ID: VN8V1CBYX17 ΑK 99645-8707 Palmer FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 50.00 Name of Employer Occupation Retired Teacher Receipt For: 2014 Election Cycle-to-Date | Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) Thomas E Schulz Date of Receipt Mailing Address 715 Miller Ridge Rd 03 28 2014 City State Zip Code Transaction ID: VN8V1CG5JP1 Ketchikan AK 99901-6361 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 50.00 Name of Employer Occupation Attorney at Law Self Receipt For: 2014 Election Cycle-to-Date | Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... 2010.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Reports and Statement or for commercial purposes, other than using the name of			
NAME OF COMMITTEE (In Full) Moore for Alaska	the name and a	address of any political committe	ee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. Matthew E Moore Mailing Address 7035 Tulugak Cir			Date of Receipt 01 30 2014
City Anchorage	State AK	Zip Code 99507-1264	Transaction ID : VN8V1C8M5E3
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 4000.00
Name of Employer SELF- MEDICAL PRACTICE SOLUTIONS Receipt For: 2013 Primary General Other (specify)	SELF- MEDICAL PRACTICE SOLUTIONS Receipt For: 2013 Primary General BUSINESS CONSULTANT Election Cycle-to-Date		
B. Full Name (Last, First, Middle Initial) Eric A Kueffner Mailing Address 11000 Sundown Dr			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Juneau	State AK	Zip Code 99801-7618	Transaction ID: VN8V1CAP0J5
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
Name of Employer Information Requested Receipt For: 2013 Primary General Other (specify)	Occupation Attorney Election Co	ycle-to-Date 50.00	50.00
Full Name (Last, First, Middle Initial) Matthew E Moore Mailing Address 7035 Tulugak Cir		, ,	Date of Receipt
City Anchorage	State AK	Zip Code 99507-1264	02 21 2014
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer SELF- MEDICAL PRACTICE SOLUTIONS Receipt For: 2014		n S CONSULTANT ycle-to-Date	2100.00
Primary General Other (specify)		32200.00	
SUBTOTAL of Receipts This Page (optional).			6150.00

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

20	CHEDULE A (FEC Form 3)			FOR LINE NUMBER: PAGE 10 OF 38
	·		Use separate schedule(s) for each category of the	(check only one)
IT	EMIZED RECEIPTS		Detailed Summary Page	11a 11b 11c 11d 11d 12 13a X 13b 14 15
				12 13a X 13b 14 15
\	NAME OF COMMITTEE (In Full)		• •	
/	Moore for Alaska			
Δ.	Full Name (Last, First, Middle Initial) Matthew E Moore			Date of Receipt
	Mailing Address 7035 Tulugak Cir			02 26 2014
	City	State	Zip Code	
	Anchorage	AK	99507-1264	Transaction ID : VN8V1CAP0G9
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer SELF- MEDICAL PRACTICE SOLUTIONS	Occupation BUSINESS	CONSULTANT	4000.00
	Receipt For: 2013 Primary General Other (specify)	Election C	ycle-to-Date 36200.00	Matt Moore Campaign Loan
R	Full Name (Last, First, Middle Initial) Matthew E Moore			Date of Receipt
٠.	Mailing Address 7035 Tulugak Cir	03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State AK	Zip Code	Transaction ID: VN8V1CG1857
	Anchorage	AN	99507-1264	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	3000.00
	SELF- MEDICAL PRACTICE SOLUTIONS	BUSINESS	CONSULTANT	
	Receipt For: 2014 Primary General	Election C	ycle-to-Date	
	Other (specify) General		39200.00	Matt Moore Campaign Loan
	Full Name (Last, First, Middle Initial) Matthew E Moore			Date of Receipt
Ο.	Mailing Address 7035 Tulugak Cir			03 / DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Anchorage	State AK	Zip Code 99507-1264	Transaction ID: VN8V1CG18A7
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer SELF- MEDICAL PRACTICE SOLUTIONS	Occupation	S CONSULTANT	2000.00
	Receipt For: 2014	l	ycle-to-Date	
	Primary General Other (specify)		41200.00	Matt Moore Campaign Loan
s	UBTOTAL of Receipts This Page (optional)			9000.00

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

15150.00

S	CHEDULE E	3 (FEC Form	3)	Llee concrete col		FOR LINE NUMBER: PAGE 11 OF 38
		SBURSEMEN	-	Use separate schedule(s) (of for each category of the		check only one) X 17 18 19a 19b
			- 0	Detailed Summar	y Page	20a 20b 20c 21
						erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COM	MITTEE (In Full)				
	Moore for A	Alaska				
	•	First, Middle Initial)	Data (Bida mana)			
A.	WELLS FA	RGO				Date of Disbursement
	Mailing Address 301 W Northern Lights Blvd					01 03 2014
	City		State		Amount of Each Disbursement this Period	
	Anchorage		AK		52.72	
	Purpose of Disbu Bankcard Merch				001	53.72
	Candidate Name					Transaction ID : VN7VS9PXTG1
					Category/ Type	
	Office Sought:	House	Disbursement For			
		Senate	Y Primary	General		
	State:	President District:	Other (s	pecity)		
		First, Middle Initial)				
В.	Muldoon St	tation USPS				Date of Disbursement
٥.	•					M M / D D / Y Y Y
	Mailing Address 2420 Muldoon Rd					01 06 2014
	City		State AK	Zip Code		Amount of Each Disbursement this Period
	Anchorage Purpose of Disbu	ırsement	AN	99504-3673		132.00
	Postage for carr	paign mailings			001	Transaction ID : VN7VS9PXTB1
	Candidate Name				Category/ Type	Transaction is . WAY VOSI ATE
	Office Sought:	House	Disbursement For			
		Senate	Primary			
	State:	President District:	Other (s	ресіту)		
_		First, Middle Initial)				
C.	,	ness Park Stor	е			Date of Disbursement
	Mailing Address	4711 Business Park I Suite 10, Building 1	Blvd			01
	City	, ,		p Code		Amount of Each Disbursement this Period
	Anchorage AK 99503-7166					20.00
	Purpose of Disbursement Refill campaign phone minutes			001	20.00	
	Candidate Name			Category/ Type	Transaction ID : VN7VS9PXTE5	
	Office Sought:	House	Disbursement For	: 2013	71 -	-
		Senate	Y Primary	General		
	Stata	President	Other (s	pecify)		
г	State:	District:				

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

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

205.72

	· ·					
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS			ose separate seriedate(s)		FOR LINE NUMBER: PAGE 12 OF 3: (check only one) X 17	
					erson for the purpose of soliciting contributions e to solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) Moore for Alaska					
Α.	Full Name (Last, First, Middle Initial) WELLS FARGO	Date of Disbursement				
	Mailing Address 301 W Northern Lights	Blvd			01 09 2014	
	City Anchorage	State AK	Zip Code 99503-2652		Amount of Each Disbursement this Period	
	Purpose of Disbursement Online view of deposit images			001	3.00 Transaction ID : VN7VS9PXTF3	
	Candidate Name Office Sought: House	Disbursement For	2013	Category/ Type		
	Senate President	Primary Other (s	General			
_	State: District: Full Name (Last, First, Middle Initial)					
В.	Katherine Pfeiffer Mailing Address 628 Mumford St				Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State AK	Zip Code 99508-1121		Amount of Each Disbursement this Period	
	Anchorage Purpose of Disbursement Campaign Management Services 1/1/1	001	2000.00			
	Candidate Name		Category/ Type	Transaction ID: VN7VS9Q7DH1		
	Office Sought: House Senate President	Disbursement For Primary Other (s	General			
_	State: District: Full Name (Last, First, Middle Initial) AT&T Business Park Store	<u> </u>			Date of Disbursement	
O.	Mailing Address 4711 Business Park B				01 18 / Y Y Y Y Y	
	Suite 10, Building 1 City Anchorage	Amount of Each Disbursement this Period				
	Purpose of Disbursement Mobile Share monthly recurring expense			001	24.71 Transaction ID : VN7VS9Q7D80	
	Candidate Name					
	Office Sought: House Senate President	Disbursement For Primary Other (s	General			
Г	State: District:					
					0007.74	

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

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

	•					
SCHEDULE B (FEC Form 3)		-	Use separate schedule(s) (c		FOR LINE NUMBER: PAGE 13 OF 38 (check only one)	
IT	EMIZED DISE	BURSEMENT	rs	for each category Detailed Summar		X 17 18 19a 19b 20a 20b 20c 21
						person for the purpose of soliciting contributions e to solicit contributions from such committee.
	Moore for Ala	, ,				
A.	Full Name (Last, Fir AT&T Busine		Date of Disbursement			
	Mailing Address 47 Su	11 Business Park B lite 10, Building 1	01 23 2014			
	City State Zip Code Anchorage AK 99503-7166					Amount of Each Disbursement this Period
	Purpose of Disburse Mobile Share month		se		001	24.71 Transaction ID : VN7VS9Q7D98
	Candidate Name				Category/ Type	Transaction ID 1 that 1884 I Do
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General		
		District:				
В.	Full Name (Last, First, Middle Initial) Westmark Baranof Mailing Address 127 N Franklin St					Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Juneau		State AK	Zip Code 99801-1222		Amount of Each Disbursement this Period
	Purpose of Disbursement Hotel Room charges for campaign trip 002					333.76
	Candidate Name				Category/ Type	Transaction ID: VN7VS9Q7DD9
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General		
_		ot Middle Initial				
C.	Full Name (Last, First, Middle Initial) Westmark Baranof					Date of Disbursement
	Mailing Address ₁₂	7 N Franklin St				01 27 7 2014
	City State Zip Code Juneau AK 99801-1222				Amount of Each Disbursement this Period	
	Purpose of Disbursement Hotel Room charges for campaign trip			001	166.88	
	Candidate Name				Category/ Type	Transaction ID : VN7VS9R1E62
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General		
_	State: D	District:				

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

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

525.35

•			
SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summary	edule(s) of the	FOR LINE NUMBER: (check only one) X 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Moore for Alaska			
Full Name (Last, First, Middle Initial) A. Michele Vasquez			Date of Disbursement
Mailing Address PO Box 1150			01 31 2014
City State Kenai AK Purpose of Disbursement	Zip Code 99611-1150		Amount of Each Disbursement this Period 500.00
Campaign Treasurer Services for January 2014 Candidate Name		001 Category/	Transaction ID : VN7VS9Q7DX6
Office Sought: House Senate President State: Disbursement F Prima Other		Type	
Full Name (Last, First, Middle Initial) Katherine Pfeiffer Mailing Address 628 Mumford St			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State	Zip Code		Amount of Each Disbursement this Period
Anchorage AK Purpose of Disbursement Campaign Management Services 1/15/14 - 1/31/14 Candidate Name	99508-1121	001 Category/ Type	2000.00 Transaction ID : VN7VS9R1E54
Office Sought: House Senate President State: Disbursement F Prima Other		турс	
Full Name (Last, First, Middle Initial) NELLS FARGO			Date of Disbursement
Mailing Address 301 W Northern Lights Blvd			02 03 7 7 7 7 7 7
City State Anchorage AK Purpose of Disbursement Bankcard Merchant Fees	Zip Code 99503-2652	001	Amount of Each Disbursement this Period 50.68
Candidate Name		Category/ Type	Transaction ID: VN7VS9R1E20
		1,500	
State: District:			
SUBTOTAL of Disbursements This Page (optional)			2550.68

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

_					FOR LINE NUMBER: PAGE 15 OF 38	
	CHEDULE B (FEC FO EMIZED DISBURSEM	-	Use separate sch for each category Detailed Summar	nedule(s) of the	check only one) X 17	
					erson for the purpose of soliciting contributions to solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) Moore for Alaska					
Full Name (Last, First, Middle Initial) A. Katherine Pfeiffer		ial)			Date of Disbursement	
	Mailing Address 628 Mumford St				02 14 2014	
	City Anchorage	State AK	Zip Code 99508-1121		Amount of Each Disbursement this Period	
	Purpose of Disbursement Campaign Management Services	2.1.14 - 2.15.14		001	2000.00 Transaction ID : VN7VS9R60Y1	
	Candidate Name			Category/ Type	1	
	Office Sought: House Senate President	Disbursement For Primary Other (s	General			
_	State: District: Full Name (Last, First, Middle Init	ial)				
В.	Christensen & Associa	tes			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code		Amount of Each Disbursement this Period	
	Washington DC 20003-1107				1750.00	
	Purpose of Disbursement National Fundraising & Political C	onsulting		001	Transaction ID : VN7VS9RMFK5	
	Candidate Name			Category/ Type		
	Office Sought: House Senate President	Disbursement For Primary Other (s	General			
_	State: District:	·- n				
C.	Full Name (Last, First, Middle Init NGP-VAN, Inc.	iai)			Date of Disbursement	
	Mailing Address 1101 15th St NW Ste 500	02 / 21 / 2014				
	City Washington	Amount of Each Disbursement this Period				
	Purpose of Disbursement OVERHEAD		003	2100.00		
	Candidate Name				Transaction ID: VN7VS9RYG13	
	Office Sought: House Senate President	Disbursement For Primary Other (s	General	Туре		
_	State: District:					
					5850.00	

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

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

1mage# 14960810103 PAGE 16 / 38

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F 9 @ 5 H9 8 'HC' 5 'F 9 D C F H Z G7 < 98 I @ 'C F' + H9 A = N 5 H = C B

Form/Schedule: SB17

Transaction ID: VN7VS9RYG13

PAID BY DONATION M MOORE, CANDIDATE.

Form/Schedule: Transaction ID:

			ı					
	SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS Use separate so for each catego Detailed Summa					FOR LINE NUMBER: PAGE 17 OF 38 (check only one)		
						20a 20b 20c 21 erson for the purpose of soliciting contributions e to solicit contributions from such committee.		
	NAME OF COMMITTEE	(In Full)						
Α.	Full Name (Last, First, Middle Initial) Katherine Pfeiffer			Date of Disbursement				
	Mailing Address 628 M	lumford St	02 28 2014					
	City Anchorage		State AK	Zip Code 99508-1121		Amount of Each Disbursement this Period		
	Purpose of Disburseme Campaign Managemer		2014 - 2.28.2014		001	2000.00 Transaction ID: VN7VS9RMFM3		
	Candidate Name				Category/ Type			
		House Senate President	Disbursement For Primary Other (s	General				
_	State: Distri							
В.	Full Name (Last, First, Middle Initial) Michele Vasquez Mailing Address PO Box 1150					Date of Disbursement O2		
	City		State	Zip Code				
	Kenai		AK	99611-1150		Amount of Each Disbursement this Period		
	Purpose of Disbursement Campaign Treasurer Services for February 2014					500.00 Transaction ID : VN7VS9R60W5		
	Candidate Name				Category/ Type			
		House Senate President	Disbursement Formary Primary Other (s	General				
	State: Distri			. ,,				
C.	Full Name (Last, First, I	•				Date of Disbursement		
	Mailing Address 301 W Northern Lights Blvd					03		
	City State Zip Code Anchorage AK 99503-2652					Amount of Each Disbursement this Period		
	Purpose of Disburseme Bankcard Merchant Fe	ent es			001	28.25		
	Candidate Name				Category/ Type	Transaction ID: VN7VS9RMFR3		
		House Senate President	Disbursement For Primary Other (s	General				
	State: Distri			<u>-</u>				
						2528.25		

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

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

	DA OF 10 OF 20	
TEMIZED DISBURSEMENTS Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER: (check only one)	PAGE 18 OF 38	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of s		
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from	rom such committee.	
NAME OF COMMITTEE (In Full) Moore for Alaska		
Full Name (Last, First, Middle Initial) A. FACEBOOK ADVERTISING Date of Disbursement	Date of Disbursement	
Mailing Address 156 University Ave 03 10	2014	
City State Zip Code Amount of Each Disb Palo Alto CA 94301-1688	oursement this Period	
Purpose of Disbursement	25.15	
Facebook Advertising for Campaign Candidate Name Oo1 Category/ Category/	S9RMFP9	
Office Sought: House Senate President Disbursement For: 2013 Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)		
Katherine Pfeiffer Mailing Address 628 Mumford St Date of Disbursement Mailing Address 628 Mumford St	nt / Y Y Y Y Y Y Y 2014	
City State Zip Code Amount of Each Disb Anchorage AK 99508-1121	oursement this Period	
Purpose of Disbursement Campaign Management Services 3.1.2014 - 3.15.2014	2000.00	
Candidate Name Category/ Type Transaction ID : VN7VS	Transaction ID: VN7VS9RS7X8	
Office Sought: House		
Full Name (Last, First, Middle Initial)		
C. Katherine Pfeiffer Date of Disbursement		
Mailing Address 628 Mumford St 28	03	
City State Zip Code Amount of Each Disb	oursement this Period	
Anchorage AK 99508-1121	1000.00	
Purpose of Disbursement Management 001	1000.00	
Candidate Name Category/ Type Transaction ID : VN7VS	S9RYFX1	
Office Sought: House Senate President Disbursement For: 2014 Senate Primary Other (specify) CHECK # 2534		
State: District:		

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

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

3025.15

1mage# 14960810106 PAGE 19 / 38

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SB17

Transaction ID: VN7VS9RYFX1

INV 032014-9

Form/Schedule: Transaction ID:

Image# 14960810107				
SCHEDULE B (FEC Form STEMIZED DISBURSEMENT	•	Use separate sch for each category Detailed Summar	nedule(s) of the	FOR LINE NUMBER: PAGE 20 OF 38 (check only one) X 17
				person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Moore for Alaska	mig the hame and c	addition of diff		
Full Name (Last, First, Middle Initial) A. Michele Vasquez	Date of Disbursement			
Mailing Address PO Box 1150				03 31 2014
City Kenai Purpose of Disbursement	State AK	Zip Code 99611-1150		Amount of Each Disbursement this Period 500.00
Campaign Treasurer Services for March Candidate Name	1 2014		001 Category/	Transaction ID : VN7VS9RS648
Office Sought: House Senate President State: District:	Disbursement For Primary Other (s	General	Type	
Full Name (Last, First, Middle Initial) 3. Mailing Address				Date of Disbursement
City	State	Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement				
Candidate Name			Category/ Type	
Office Sought: House Senate President State: District:	Disbursement For Primary Other (s	General		
Full Name (Last, First, Middle Initial)				Date of Disbursement
Mailing Address				M M / D D / Y Y Y
City State Zip Code				Amount of Each Disbursement this Period
Purpose of Disbursement				
Candidate Name			Category/ Type	
Office Sought: House Senate President	Disbursement For Primary Other (s	General		

State:

District:

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

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

500.00

17212.86

Use separate schedule(s)

FOR LINE NUMBER:

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X	13b

OANS		for each category of the Detailed Summary Pag	
IAME OF COMMITTEE (In Full) Moore for Alaska		Transac	tion ID : VN8V1B45AQ0L
LOAN SOURCE Full Name (Last, First, M Matthew E Moore	iddle Initial)	[PERSONAL FUNDS]	Election: 2013 Primary General
Mailing Address 7035 Tulugak Cir			Other (specify)
City	State ZIP Cod		
Anchorage	AK 99507-1	264	
Original Amount of Loan	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Period
Date Incurred M 06 / 21 / Y 2013	Date Due	Interest Rate	
List All Endorsers or Guarantors (if any)	to Loan Source	Name of Franksian	
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 1 1 1
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7 7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9
SUBTOTALS This Period This Page (optional) FOTALS This Period (last page in this line on			100.00
Carry outstanding balance only to LINE 3, So			vard to appropriate line of Summary.

1mage# 14960810109 PAGE 22 / 38

: 97 'A = G7 9 @ G B9 CI G'H9 LH F 9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F '+ H9 A = N5 H= C B

Form/Schedule: SC/10

Transaction ID : VN8V1B45AQ0L

Flling Fee -AK Division of Elections Candidate Loan

Form/Schedule: Transaction ID:

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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38

(check only one) Detailed Summary Page Transaction ID: VN8V1B45B92L NAME OF COMMITTEE (In Full) Moore for Alaska LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2013 [PERSONAL FUNDS] Primary Matthew E Moore General Mailing Address Other (specify) \blacktriangledown 7035 Tulugak Cir State ZIP Code City AK 99507-1264 Anchorage Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 05 ^M 07^M 2013 none ňone % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 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.

1mage# 14960810111 PAGE 24 / 38

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SC/10

Transaction ID: VN8V1B45B92L

CANDIDATE LOAN TO CAMPAIGN

Form/Schedule: Transaction ID:

Use separate schedule(s)

FOR LINE NUMBER:

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X	13b

OANS			for each category of the Detailed Summary Pag	
IAME OF COMMITTEE (In Full)		Transac	ction ID : VN8V1B45B50L
LOAN SOURCE Full Name Matthew E Moore	e (Last, First, Mid	dle Initial)	[PERSONAL FUNDS]	Election: 2013 Primary General
Mailing Address 7035 Tulugak Cir				Other (specify)
City		State ZI	P Code	
Anchorage		AK 9:	9507-1264	
Original Amount of Loan	6000.00	Cumulative Payme	nt To Date Bala	ance Outstanding at Close of This Period
TERMS		2	9	9 9
Date Incurred	d Ž013 ^Y	Date	Due Interest Rate	
List All Endorsers or Guar	antors (if any) to	Loan Source		Tes No
1. Full Name (Last, First, N	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, M	iddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 9
3. Full Name (Last, First, M	iddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9
4. Full Name (Last, First, M	iddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 9
SUBTOTALS This Period This	Page (optional)		······	6000.00
FOTALS This Period (last page	e in this line only)		
Carry outstanding balance on	ly to LINE 3, Sch	edule D, for this lir	e. If no Schedule D, carry forv	ward to appropriate line of Summary.

1mage# 14960810113 PAGE 26 / 38

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F 9 @ 5 H9 8 'HC' 5 'F 9 D C F H Z G7 < 98 I @ 'C F' + H9 A = N 5 H = C B

Form/Schedule: SC/10

Transaction ID: VN8V1B45B50L

CANDIDATE LOAN TO CAMPAIGN

Form/Schedule: Transaction ID:

Use separate schedule(s)

FOR LINE NUMBER:

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DANS			Detailed Summary P	
AME OF COMMITTEE (In Fu	ıll)		Trans	action ID : VN8V1B45AW9L
LOAN SOURCE Full Nam Matthew E Moore	ne (Last, First, Mid	dle Initial)	[PERSONAL FUNDS]	Election: 2013 Primary General
Mailing Address 7035 Tulugak Cir				Other (specify) ▼
City		State Z	IP Code	
Anchorage		AK 9	9507-1264	
Original Amount of Loan		Cumulative Payme	ent To Date Ba	alance Outstanding at Close of This Period
, , ,	5000.00		0.00	5000.00
Date Incurr	red Y 2013 Y	Date	e Due Interest Ra	ne % (apr)
List All Endorsers or Gu	arantors (if any) to	Loan Source		Yes No
1. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9
2. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 9
3. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9
UBTOTALS This Period Thi				5000.00

1mage# 14960810115 PAGE 28 / 38

: 97 'A = G7 9 @ G B9 CI G'H9 LH F 9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F '+ H9 A = N5 H= C B

Form/Schedule: SC/10

Transaction ID: VN8V1B45AW9L

Candidate Loan to Campaign

Form/Schedule: Transaction ID:

Use separate schedule(s)

FOR LINE NUMBER:

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OANS		for each category of the Detailed Summary Page	
IAME OF COMMITTEE (In Fu	II)	Transaction	on ID : VN8V1BD6YV3L
Moore for Alaska			
LOAN SOURCE Full Nam Matthew E Moore	ne (Last, First, Middle Initial)		Election: 2013 Primary
Mailing Address 7035 Tulugak Cir			General Other (specify) ▼
City	State ZIF	P Code	
Anchorage		507-1264	
Original Amount of Loan	Cumulative Paymer	nt To Date Balanc	ce Outstanding at Close of This Period
	5000.00	0.00	5000.00
TERMS Date Incurr	ed Date	Due Interest Rate	Secured:
List All Endorsers or Gua	arantors (if any) to Loan Source		Yes No
1. Full Name (Last, First,		Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, , , , , , , , ,
2. Full Name (Last, First, I	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, , , , , ,
3. Full Name (Last, First, I	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	, , , , , ,
4. Full Name (Last, First, I	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period Thi	s Page (optional)	······································	5000.00
FOTALS This Period (last page	ge in this line only)		7 7
Carry outstanding balance o	nly to LINE 3, Schedule D, for this line	e. If no Schedule D, carry forwa	rd to appropriate line of Summary.

Use separate schedule(s)

FOR LINE NUMBER:

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	13a
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OANS		for each category of the Detailed Summary Page (check only one) 13a
IAME OF COMMITTEE (In Fu	II)	Transaction ID : VN8V1BP5TS6L
Moore for Alaska		
	ne (Last, First, Middle Initial)	Election: 2013
Matthew E Moore		Primary General
Mailing Address 7035 Tulugak Cir		Other (specify) ▼
City	State ZI	P Code
Anchorage	AK 9	9507-1264
Original Amount of Loan	Cumulative Payme	
, , , ,	4000.00	0.00 4000.00
TERMS Date Incurr	Date 2013	y y y y none
	arantors (if any) to Loan Source	% (apr) Yes
Full Name (Last, First,	* **	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, I	Middle Initial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, I	Middle Initial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, I	Middle Initial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This	s Page (optional)	4000.00
FOTALS This Period (last page	ge in this line only)	
Carry outstanding balance o	nly to LINE 3, Schedule D, for this lir	e. If no Schedule D, carry forward to appropriate line of Summary

Use separate schedule(s)

FOR LINE NUMBER:

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×	13b

OANS			for each category of the Detailed Summary Page (check only one) 13a
AME OF COMMITTEE (In Full))		Transaction ID : VN8V1BTBV26L
LOAN SOURCE Full Name	(Last, First, Mid	dle Initial)	Election: 2013
Matthew E Moore	, , ,	,	Primary General
Mailing Address 7035 Tulugak Cir			Other (specify) ▼
City		State ZIP Co	ode
Anchorage		AK 99507	-1264
Original Amount of Loan		Cumulative Payment To	
7	5000.00	7	0.00 5000.00
TERMS Date Incurred 12 13 7	ž013 ^Y	Date Due	none % (apr)
List All Endorsers or Guar	antors (if anv) to	Loan Source	Yes No
1. Full Name (Last, First, N	` •		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, M	iddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, M	iddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, M	iddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This	Page (optional)		5000.00
FOTALS This Period (last page	e in this line only)		
	ly to LINE 3, Sch	edule D, for this line. If	no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s)

FOR LINE NUMBER:

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	13a
$\overline{\mathbf{v}}$	13h

OANS		for each category of the Detailed Summary Page (check	only one) 13a
IAME OF COMMITTEE (In Fu	ıll)	Transaction ID: VN8V	1, , 1
LOAN SOURCE Full Nan Matthew E Moore	ne (Last, First, Middle Initial)	Election: 2	013
Mailing Address 7035 Tulugak Cir			pecify) 🔻
City	State ZIF	Code	
Anchorage	AK 99	507-1264	
Original Amount of Loan	Cumulative Paymer		ng at Close of This Period
	4000.00	0.00	4000.00
TERMS Date Incurr	ed Date	Due Interest Rate y y y y none none % (a)	Secured:
List All Endorsers or Gua	arantors (if any) to Loan Source	70 (0	Yes No
1. Full Name (Last, First,	* **	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 Thi	s Page (optional)	·····	4000.00
FOTALS This Period (last pa	ge in this line only)		7
Carry outstanding balance o	nly to LINE 3, Schedule D, for this line	e. If no Schedule D, carry forward to approp	priate line of Summary.

Use separate schedule(s)

FOR LINE NUMBER:

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$oldsymbol{ abla}$	13h

OANS		Detailed Summary Page	(check only one) 13a
IAME OF COMMITTEE (In Full)		Transaction	on ID : VN8V1CAP0J5L
Moore for Alaska			
LOAN SOURCE Full Name (Last, Eric A Kueffner	First, Middle Initial)		Election: 2013 Primary
Mailing Address 11000 Sundown Dr			General Other (specify) ▼
City	State ZIP C	ode	
Juneau	AK 99801	-7618	
Original Amount of Loan	Cumulative Payment T	o Date Baland	ce Outstanding at Close of This Period
50	.00	0.00	50.00
Date Incurred MO2M / D18D / Y Z014	Date Due	Interest Rate	Secured:
List All Endorsers or Guarantors	(if any) to Loan Source		Yes No
1. Full Name (Last, First, Middle I	· · · · · · · · · · · · · · · · · · ·	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	p 1 1 m 1
2. Full Name (Last, First, Middle In	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle In	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	p 1 1 m 1
4. Full Name (Last, First, Middle In	itial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional)		50.00
TOTALS This Period (last page in this	line only)		
Carry outstanding balance only to LII	NE 3. Schedule D. for this line. If	f no Schedule D. carry forwa	rd to appropriate line of Summary.

Use separate schedule(s)

FOR LINE NUMBER:

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×	13b

OANS		for each category of the Detailed Summary Pag	
IAME OF COMMITTEE (In Fo	(III)	Transac	tion ID : VN8V1CM1A67L
	(I Fine Middle Inti-I)		T = 1
Matthew E Moore	ne (Last, First, Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 7035 Tulugak Cir			Other (specify) ▼
City	State ZIF	² Code	
Anchorage	AK 99	507-1264	
Original Amount of Loan	Cumulative Paymen	nt To Date Bala	ance Outstanding at Close of This Period
	2100.00	0.00	2100.00
Date Incur	red Date I	Due Interest Rate	
List All Endorsers or Gu	arantors (if any) to Loan Source		Yes No
1. Full Name (Last, First,	· • • • • • • • • • • • • • • • • • • •	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9
2. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9
3. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9
4. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 8
SUBTOTALS This Period Th	is Page (optional)	·····	2100.00
FOTALS This Period (last pa	ge in this line only)		, , , , ,
Carry outstanding balance of	only to LINE 3, Schedule D, for this line	e. If no Schedule D, carry forv	vard to appropriate line of Summary.

1mage# 14960810122 PAGE 35 / 38

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F 9 @ 5 H9 8 'HC' 5 'F 9 D C F H Z G7 < 98 I @ 'C F' + H9 A = N 5 H = C B

Form/Schedule: SC/10

Transaction ID: VN8V1CM1A67L

PAYMENT OF NGP VAN DEBT BY CANDIDATE

Form/Schedule: Transaction ID:

CHEDULE C (FEC Form 3) OANS		Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 36 OF 38 FOR LINE NUMBER: (check only one) 13a X 13b
AME OF COMMITTEE (In Full) Moore for Alaska		Transaction	ID: VN8V1CAP0G9L
LOAN SOURCE Full Name (Last, First, Mic Matthew E Moore	ddle Initial)		Primary
Mailing Address 7035 Tulugak Cir			General Other (specify) ▼
City	State ZIP Cod	e	
Anchorage	AK 99507-12	264	
Original Amount of Loan	Cumulative Payment To [Outstanding at Close of This Period
4000.00		0.00	4000.00
Date Incurred M02 ^M / D26 ^D / Y 2014 Y		Interest Rate	Secured: % (apr) Yes No
List All Endorsers or Guarantors (if any) to	o Loan Source		103 140
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y
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 Amount	
City State	ZIP Code	Guaranteed Outstanding:	7
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only			4000.00

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

Use separate schedule(s) for each category of the

FOR

LINE NUMBER:		i
k only one)		13a
	X	13k

PAGE 37 OF

DANS		Detailed Summary Page (check only one)
AME OF COMMITTEE (In Full)		Transaction ID : VN8V1CG1857L
Moore for Alaska		
LOAN SOURCE Full Name (Last,	First, Middle Initial)	Election: 2014
Matthew E Moore		Primary General
Mailing Address 7035 Tulugak Cir		Other (specify) ▼
City	State	ZIP Code
Anchorage	AK	99507-1264
Original Amount of Loan	Cumulative Paym	nent To Date Balance Outstanding at Close of This Period
300	0.00	0.00 3000.00
TERMS Date Incurred	Dat	te Due Interest Rate Secured:
M 03 M / D 17 D / Y Ž014	Y M M / D D	none % (apr) Yes
List All Endorsers or Guarantors	(if any) to Loan Source	103 19
1. Full Name (Last, First, Middle	nitial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Ir	itial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Ir	itial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Ir	itial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	3000.00
OTALS This Period (last page in this	line only)	>
	NE 3, Schedule D, for this I	line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

38

	13a
X	13b

OANS		for each category of the Detailed Summary Page	(check only one) 13a
AME OF COMMITTEE (In F	ull)	Transactio	on ID : VN8V1CG18A7L
Moore for Alaska			
LOAN SOURCE Full Nar	me (Last, First, Middle Initial)	[E	Election: 2014
Matthew E Moore		Primary General	
Mailing Address 7035 Tulugak Cir			Other (specify) ▼
City	State ZI	P Code	
Anchorage	AK 9	9507-1264	
Original Amount of Loan	Cumulative Payme	ent To Date Balanc	e Outstanding at Close of This Period
	2000.00	0.00	2000.00
TERMS Date Incur		V V V V	Secured:
03 25	2014	none none	% (apr) Yes No
List All Endorsers or Gu The state of the state	arantors (if any) to Loan Source	Name of Employer	
i. Full Name (Last, First,	, ivilidate iriitiati)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9
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:	9
4. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	9
SURTOTALS This Daried Th	is Page (optional)		2000.00
JODIO IALO IIIIS FEIIOU III			2000.00
FOTALS This Period (last pa	age in this line only)	······································	41250.00
Carry outstanding balance	only to LINE 3, Schedule D, for this lir	ne. If no Schedule D, carry forwar	rd to appropriate line of Summary.