

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

Moore for Alaska

ADDRESS (number and street)

2440 E TUDOR ROAD

PMB 1117

Check if different than previously reported. (ACC)

Anchorage

AK

99507

2. FEC IDENTIFICATION NUMBER ▼

C C00520544

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

AK

00

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

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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 MICHELE Vasquez

Signature of Treasurer MICHELE Vasquez

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Moore for Alaska

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2014 To: M M / D D / Y Y Y Y 03 / 31 / 2014

	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))....	3935.00	17296.50
(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)).....	3935.00	17296.50
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	17718.27	53061.43
(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)).....	17718.27	53061.43
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2893.07	
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).....	41250.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Moore for Alaska

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).....	2010.00	7560.00
(ii) Unitemized.....	1925.00	9736.50
(iii) TOTAL of contributions from individuals ▶	3935.00	17296.50
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	3935.00	17296.50
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	15150.00	41250.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	15150.00	41250.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	8.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	19085.00	58554.50

DETAILED SUMMARY PAGE
of Disbursements

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
(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	3000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	17718.27	56061.43

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1526.34
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	19085.00
25. SUBTOTAL (add Line 23 and Line 24).....	20611.34
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17718.27
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2893.07

**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 38
	<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)
Moore for Alaska

A. Full Name (Last, First, Middle Initial)
Kevin Kerr

Mailing Address 2941 Wentworth St

City Anchorage State AK Zip Code 99508-4341

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

Name of Employer Self Occupation Accountant

Receipt For: 2013
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : VN8V1BWQYJ7

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Carolyn H Covington

Mailing Address 3350 N Clark Wolverine Rd

City Palmer State AK Zip Code 99645-8707

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

Name of Employer Retired Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 09 / 2014

Transaction ID : VN8V1BWNF97

Amount of Each Receipt this Period
 50.00

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

Mailing Address 1526 F St

City Anchorage State AK Zip Code 99501-5030

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

Name of Employer Self Occupation Attorney

Receipt For: 2013
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 17 / 2014

Transaction ID : VN8V1C22KN2

Amount of Each Receipt this Period
 160.00

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

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

710.00

**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 6 OF 38
	<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)
Moore for Alaska

A. Full Name (Last, First, Middle Initial)
Kirk A Hogenson

Mailing Address 2056 Sun Valley Ct

City State Zip Code
Fairbanks AK 99709-7400

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

Name of Employer Occupation
University of Alaska Programmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 23 / 2014

Transaction ID : VN8V1C2KN07

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Matthew J Schnellbaecher

Mailing Address 7100 Montagne Cir

City State Zip Code
Anchorage AK 99507-1283

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

Name of Employer Occupation
ANMC CADIOLOGIST

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 / 30 / 2014

Transaction ID : VN8V1C3R8E2

Amount of Each Receipt this Period
250.00

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

Mailing Address 715 Miller Ridge Rd

City State Zip Code
Ketchikan AK 99901-6361

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

Name of Employer Occupation
Self Attorney at Law

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

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

Transaction ID : VN8V1C3PHT9

Amount of Each Receipt this Period
50.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 38
	<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)
Moore for Alaska

A. Full Name (Last, First, Middle Initial)
Lonnie Brown

Mailing Address 9939 Middlerock Rd

City Anchorage State AK Zip Code 99507-1287

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

Name of Employer Municipality of anchorage Occupation police officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 09 / 2014

Transaction ID : VN8V1C6X0S8

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Carolyn H Covington

Mailing Address 3350 N Clark Wolverine Rd

City Palmer State AK Zip Code 99645-8707

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

Name of Employer Retired Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 09 / 2014

Transaction ID : VN8V1C6X1C8

Amount of Each Receipt this Period
 50.00

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

Mailing Address 715 Miller Ridge Rd

City Ketchikan State AK Zip Code 99901-6361

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

Name of Employer Self Occupation Attorney at Law

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 28 / 2014

Transaction ID : VN8V1CAGH36

Amount of Each Receipt this Period
 50.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 38
	<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)
Moore for Alaska

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

Mailing Address 3350 N Clark Wolverine Rd

City Palmer State AK Zip Code 99645-8707

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

Name of Employer Retired Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 09 / 2014

Transaction ID : VN8V1CBYX17

Amount of Each Receipt this Period
50.00

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

Mailing Address 715 Miller Ridge Rd

City Ketchikan State AK Zip Code 99901-6361

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

Name of Employer Self Occupation Attorney at Law

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 28 / 2014

Transaction ID : VN8V1CG5JP1

Amount of Each Receipt this Period
50.00

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).....

100.00

2010.00

**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 38
	<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)
Moore for Alaska

A. Full Name (Last, First, Middle Initial)
Matthew E Moore

Mailing Address 7035 Tulugak Cir

City Anchorage State AK Zip Code 99507-1264

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

Name of Employer SELF- MEDICAL PRACTICE SOLUTIONS Occupation BUSINESS CONSULTANT

Receipt For: 2013
 Primary General
 Other (specify)

Election Cycle-to-Date **30100.00**

Date of Receipt **01 / 30 / 2014**

Transaction ID : VN8V1C8M5E3

Amount of Each Receipt this Period **4000.00**

Matt Moore Campaign Loan

B. Full Name (Last, First, Middle Initial)
Eric A Kueffner

Mailing Address 11000 Sundown Dr

City Juneau State AK Zip Code 99801-7618

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

Name of Employer Information Requested Occupation Attorney

Receipt For: 2013
 Primary General
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt **02 / 18 / 2014**

Transaction ID : VN8V1CAP0J5

Amount of Each Receipt this Period **50.00**

C. Full Name (Last, First, Middle Initial)
Matthew E Moore

Mailing Address 7035 Tulugak Cir

City Anchorage State AK Zip Code 99507-1264

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

Name of Employer SELF- MEDICAL PRACTICE SOLUTIONS Occupation BUSINESS CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **32200.00**

Date of Receipt **02 / 21 / 2014**

Transaction ID : VN8V1CM1A67

Amount of Each Receipt this Period **2100.00**

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

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

6150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 38
	<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)
Moore for Alaska

A. Full Name (Last, First, Middle Initial)
Matthew E Moore

Mailing Address 7035 Tulugak Cir

City Anchorage State AK Zip Code 99507-1264

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

Name of Employer: SELF- MEDICAL PRACTICE SOLUTIONS
Occupation: BUSINESS CONSULTANT

Receipt For: 2013
 Primary General
 Other (specify)

Election Cycle-to-Date: 36200.00

Date of Receipt: 02 / 26 / 2014

Transaction ID : VN8V1CAP0G9

Amount of Each Receipt this Period: 4000.00

Matt Moore Campaign Loan

B. Full Name (Last, First, Middle Initial)
Matthew E Moore

Mailing Address 7035 Tulugak Cir

City Anchorage State AK Zip Code 99507-1264

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

Name of Employer: SELF- MEDICAL PRACTICE SOLUTIONS
Occupation: BUSINESS CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 39200.00

Date of Receipt: 03 / 17 / 2014

Transaction ID : VN8V1CG1857

Amount of Each Receipt this Period: 3000.00

Matt Moore Campaign Loan

C. Full Name (Last, First, Middle Initial)
Matthew E Moore

Mailing Address 7035 Tulugak Cir

City Anchorage State AK Zip Code 99507-1264

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

Name of Employer: SELF- MEDICAL PRACTICE SOLUTIONS
Occupation: BUSINESS CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 41200.00

Date of Receipt: 03 / 25 / 2014

Transaction ID : VN8V1CG18A7

Amount of Each Receipt this Period: 2000.00

Matt Moore Campaign Loan

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

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

9000.00

15150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 38			
	<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)
Moore for Alaska

Full Name (Last, First, Middle Initial) A. WELLS FARGO		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 301 W Northern Lights Blvd		Amount of Each Disbursement this Period 53.72
City Anchorage	State AK	
Zip Code 99503-2652	Purpose of Disbursement Bankcard Merchant Fees	Transaction ID : VN7VS9PXTG1
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Muldoon Station USPS		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014
Mailing Address 2420 Muldoon Rd		Amount of Each Disbursement this Period 132.00
City Anchorage	State AK	
Zip Code 99504-3673	Purpose of Disbursement Postage for campaign mailings	Transaction ID : VN7VS9PXTB1
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T Business Park Store		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address 4711 Business Park Blvd Suite 10, Building 1		Amount of Each Disbursement this Period 20.00
City Anchorage	State AK	
Zip Code 99503-7166	Purpose of Disbursement Refill campaign phone minutes	Transaction ID : VN7VS9PXTE5
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	205.72
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 38			
	<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)
Moore for Alaska

Full Name (Last, First, Middle Initial) A. WELLS FARGO		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2014
Mailing Address 301 W Northern Lights Blvd		Amount of Each Disbursement this Period 3.00 Transaction ID : VN7VS9PXTF3
City Anchorage	State AK Zip Code 99503-2652	
Purpose of Disbursement Online view of deposit images	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Katherine Pfeiffer		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 628 Mumford St		Amount of Each Disbursement this Period 2000.00 Transaction ID : VN7VS9Q7DH1
City Anchorage	State AK Zip Code 99508-1121	
Purpose of Disbursement Campaign Management Services 1/1/14 - 1/15/14	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. AT&T Business Park Store		Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2014
Mailing Address 4711 Business Park Blvd Suite 10, Building 1		Amount of Each Disbursement this Period 24.71 Transaction ID : VN7VS9Q7D80
City Anchorage	State AK Zip Code 99503-7166	
Purpose of Disbursement Mobile Share monthly recurring expense	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2027.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 38	
	<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)
Moore for Alaska

Full Name (Last, First, Middle Initial) A. AT&T Business Park Store		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 4711 Business Park Blvd Suite 10, Building 1		Amount of Each Disbursement this Period 24.71
City Anchorage State AK Zip Code 99503-7166	Purpose of Disbursement Mobile Share monthly recurring expense 001 Category/Type	
Candidate Name		Transaction ID : VN7VS9Q7D98
Office Sought: House Senate President State: District:	Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Westmark Baranof		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2014
Mailing Address 127 N Franklin St		Amount of Each Disbursement this Period 333.76
City Juneau State AK Zip Code 99801-1222	Purpose of Disbursement Hotel Room charges for campaign trip 002 Category/Type	
Candidate Name		Transaction ID : VN7VS9Q7DD9
Office Sought: House Senate President State: District:	Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Westmark Baranof		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 127 N Franklin St		Amount of Each Disbursement this Period 166.88
City Juneau State AK Zip Code 99801-1222	Purpose of Disbursement Hotel Room charges for campaign trip 001 Category/Type	
Candidate Name		Transaction ID : VN7VS9R1E62
Office Sought: House Senate President State: District:	Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	525.35
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 14 OF 38	
	<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)
Moore for Alaska

Full Name (Last, First, Middle Initial) A. Michele Vasquez		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address PO Box 1150		Amount of Each Disbursement this Period 500.00 Transaction ID : VN7VS9Q7DX6
City Kenai	State AK	
Zip Code 99611-1150	Purpose of Disbursement Campaign Treasurer Services for January 2014	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Katherine Pfeiffer		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 628 Mumford St		Amount of Each Disbursement this Period 2000.00 Transaction ID : VN7VS9R1E54
City Anchorage	State AK	
Zip Code 99508-1121	Purpose of Disbursement Campaign Management Services 1/15/14 - 1/31/14	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. WELLS FARGO		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 301 W Northern Lights Blvd		Amount of Each Disbursement this Period 50.68 Transaction ID : VN7VS9R1E20
City Anchorage	State AK	
Zip Code 99503-2652	Purpose of Disbursement Bankcard Merchant Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2550.68
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 38	
	<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)
Moore for Alaska

Full Name (Last, First, Middle Initial) A. Katherine Pfeiffer		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 628 Mumford St		Amount of Each Disbursement this Period 2000.00 Transaction ID : VN7VS9R60Y1
City Anchorage	State AK	
Zip Code 99508-1121	Purpose of Disbursement Campaign Management Services 2.1.14 - 2.15.14	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) B. Christensen & Associates		Date of Disbursement MM / DD / YYYY 02 / 16 / 2014
Mailing Address 209 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1750.00 Transaction ID : VN7VS9RMFK5
City Washington	State DC	
Zip Code 20003-1107	Purpose of Disbursement National Fundraising & Political Consulting	Category/Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2013	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) C. NGP-VAN, Inc.		Date of Disbursement MM / DD / YYYY 02 / 21 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 2100.00 Transaction ID : VN7VS9RYG13
City Washington	State DC	
Zip Code 20005-5006	Purpose of Disbursement OVERHEAD	Category/Type 003
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).....	5850.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : VN7VS9RYG13

PAID BY DONATION M MOORE, CANDIDATE.

Form/Schedule:

Transaction ID:

**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 17 OF 38			
	<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)
Moore for Alaska

Full Name (Last, First, Middle Initial) A. Katherine Pfeiffer		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 628 Mumford St		Amount of Each Disbursement this Period 2000.00 Transaction ID : VN7VS9RMFM3
City Anchorage State AK Zip Code 99508-1121	Purpose of Disbursement Campaign Management Services 2.16.2014 - 2.28.2014 Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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. Michele Vasquez		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address PO Box 1150		Amount of Each Disbursement this Period 500.00 Transaction ID : VN7VS9R60W5
City Kenai State AK Zip Code 99611-1150	Purpose of Disbursement Campaign Treasurer Services for February 2014 Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. WELLS FARGO		Date of Disbursement MM / DD / YYYY 03 / 03 / 2014
Mailing Address 301 W Northern Lights Blvd		Amount of Each Disbursement this Period 28.25 Transaction ID : VN7VS9RMFR3
City Anchorage State AK Zip Code 99503-2652	Purpose of Disbursement Bankcard Merchant Fees Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2528.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 38	
	<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)
Moore for Alaska

A. FACEBOOK ADVERTISING

Full Name (Last, First, Middle Initial)
Mailing Address 156 University Ave

City Palo Alto State CA Zip Code 94301-1688

Purpose of Disbursement Facebook Advertising for Campaign

Candidate Name

Office Sought: House Senate President

Disbursement For: 2013
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 03 / 10 / 2014

Amount of Each Disbursement this Period: 25.15

Transaction ID : VN7VS9RMFP9

Category/Type: 001

B. Katherine Pfeiffer

Full Name (Last, First, Middle Initial)
Mailing Address 628 Mumford St

City Anchorage State AK Zip Code 99508-1121

Purpose of Disbursement Campaign Management Services 3.1.2014 - 3.15.2014

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 03 / 17 / 2014

Amount of Each Disbursement this Period: 2000.00

Transaction ID : VN7VS9RS7X8

Category/Type: 001

C. Katherine Pfeiffer

Full Name (Last, First, Middle Initial)
Mailing Address 628 Mumford St

City Anchorage State AK Zip Code 99508-1121

Purpose of Disbursement Management

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 03 / 28 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : VN7VS9RYFX1

CHECK # 2534

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 3025.15

TOTAL This Period (last page this line number only)

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

Form/Schedule: SB17

Transaction ID : VN7VS9RYFX1

INV 032014-9

Form/Schedule:

Transaction ID:

**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 20 OF 38		
	<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)
Moore for Alaska

Full Name (Last, First, Middle Initial) A. Michele Vasquez		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address PO Box 1150		Amount of Each Disbursement this Period 500.00 Transaction ID : VN7VS9RS648
City Kenai State AK Zip Code 99611-1150	Purpose of Disbursement Campaign Treasurer Services for March 2014 Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

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

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	17212.86

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)
Moore for Alaska

Transaction ID : VN8V1B45AQ0L

LOAN SOURCE Full Name (Last, First, Middle Initial)
Matthew E Moore

[PERSONAL FUNDS]

Election: 2013

Primary
 General
 Other (specify) ▼

Mailing Address
7035 Tulugak Cir

City State ZIP Code
Anchorage AK 99507-1264

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
100.00 0.00 100.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y none % (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)..... ▶ 100.00
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.

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

Form/Schedule: SC/10

Transaction ID : VN8V1B45AQ0L

Filing Fee -AK Division of Elections Candidate Loan

Form/Schedule:

Transaction ID:

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)
Moore for Alaska

Transaction ID : VN8V1B45B92L

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

Matthew E Moore

[PERSONAL FUNDS]

Election: 2013

Primary
 General
 Other (specify) ▼

Mailing Address
7035 Tulugak Cir

City State ZIP Code
Anchorage AK 99507-1264

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1000.00 0.00 1000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 07 / D 05 / Y 2013 M M / D D / Y none % (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)..... ▶ 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.

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

Form/Schedule: SC/10

Transaction ID : VN8V1B45B92L

CANDIDATE LOAN TO CAMPAIGN

Form/Schedule:

Transaction ID:

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)
Moore for Alaska

Transaction ID : **VN8V1B45B50L**

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

Matthew E Moore

[PERSONAL FUNDS]

Election: 2013

Primary
 General
 Other (specify) ▼

Mailing Address
7035 Tulugak Cir

City State ZIP Code
Anchorage AK 99507-1264

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
6000.00 0.00 6000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
08 / 19 / 2013 none % (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)..... ▶ 6000.00
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.

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

Form/Schedule: SC/10

Transaction ID : VN8V1B45B50L

CANDIDATE LOAN TO CAMPAIGN

Form/Schedule:

Transaction ID:

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)
Moore for Alaska

Transaction ID : VN8V1B45AW9L

LOAN SOURCE Full Name (Last, First, Middle Initial)
Matthew E Moore

[PERSONAL FUNDS]

Election: 2013

Primary
 General
 Other (specify) ▼

Mailing Address
7035 Tulugak Cir

City State ZIP Code
Anchorage AK 99507-1264

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
5000.00 0.00 5000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y none % (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)..... ▶ 5000.00

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.

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

Form/Schedule: SC/10

Transaction ID : VN8V1B45AW9L

Candidate Loan to Campaign

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Moore for Alaska** Transaction ID : VN8V1BD6YV3L

LOAN SOURCE Full Name (Last, First, Middle Initial) Matthew E Moore	Election: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7035 Tulugak Cir	

City	State	ZIP Code
Anchorage	AK	99507-1264

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 10 / D 18 / Y 2013 Y	M / D / Y none Y	none % (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).....	▶	5000.00
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) **Moore for Alaska** Transaction ID : VN8V1BP5TS6L

LOAN SOURCE Full Name (Last, First, Middle Initial) Matthew E Moore	Election: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7035 Tulugak Cir	

City	State	ZIP Code
Anchorage	AK	99507-1264

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4000.00	0.00	4000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 02 / Y 2013 Y	M M / D D / Y none Y Y	none % (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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....	4000.00
TOTALS This Period (last page in this line only).....	<input type="text"/>

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) **Moore for Alaska** Transaction ID : VN8V1BTBV26L

LOAN SOURCE Full Name (Last, First, Middle Initial) Matthew E Moore	Election: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7035 Tulugak Cir	

City	State	ZIP Code
Anchorage	AK	99507-1264

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 13 / Y 2013 Y	M M / D D / Y none Y Y	none % (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).....	▶	5000.00
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

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)
Moore for Alaska

Transaction ID : **VN8V1C8M5E3L**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Matthew E Moore

Election: 2013

Primary
 General
 Other (specify) ▼

Mailing Address
7035 Tulugak Cir

City State ZIP Code
Anchorage AK 99507-1264

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
4000.00 0.00 4000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 01 / D 30 / Y 2014 M M / D D / Y none % (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)..... ▶ 4000.00

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) **Moore for Alaska** Transaction ID : VN8V1CAP0J5L

LOAN SOURCE Full Name (Last, First, Middle Initial) Eric A Kueffner	Election: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 11000 Sundown Dr	

City	State	ZIP Code
Juneau	AK	99801-7618

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50.00	0.00	50.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
02 / 18 / 2014	/ / none	none % (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).....	50.00
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) **Moore for Alaska** Transaction ID : VN8V1CM1A67L

LOAN SOURCE Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2014
Matthew E Moore Primary
 Mailing Address General
 7035 Tulugak Cir Other (specify) ▼

City State ZIP Code
 Anchorage AK 99507-1264

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2100.00	0.00	2100.00

TERMS Date Incurred Date Due Interest Rate Secured:
 M M / D D / Y Y Y Y M M / D D / Y Y Y Y none % (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)..... ▶ 2100.00
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.

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

Form/Schedule: SC/10

Transaction ID : VN8V1CM1A67L

PAYMENT OF NGP VAN DEBT BY CANDIDATE

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Moore for Alaska** Transaction ID : VN8V1CAP0G9L

LOAN SOURCE Full Name (Last, First, Middle Initial) Matthew E Moore	Election: 2013 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7035 Tulugak Cir	

City	State	ZIP Code
Anchorage	AK	99507-1264

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4000.00	0.00	4000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
02 / 26 / 2014	/ / none	none % (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).....	4000.00
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) **Moore for Alaska** Transaction ID : VN8V1CG1857L

LOAN SOURCE Full Name (Last, First, Middle Initial) Matthew E Moore	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7035 Tulugak Cir	

City	State	ZIP Code
Anchorage	AK	99507-1264

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000.00	0.00	3000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 17 / Y 2014 Y	M M / D D / Y none Y Y	none % (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).....	▶	3000.00
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) **Moore for Alaska** Transaction ID : VN8V1CG18A7L

LOAN SOURCE Full Name (Last, First, Middle Initial) Matthew E Moore	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 7035 Tulugak Cir	

City	State	ZIP Code
Anchorage	AK	99507-1264

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 03 / D 25 / Y 2014 Y	M M / D D / Y none Y Y	none % (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).....	2000.00
TOTALS This Period (last page in this line only).....	41250.00

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