

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼

Example: If typing, type over the lines.

12FE4M5

BOB DINGETHAL FOR CONGRESS

ADDRESS (number and street) ▼

PO Box 668

Check if different than previously reported. (ACC)

Vancouver

WA

98666

2. **FEC IDENTIFICATION NUMBER** ▼

C C00553818

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

WA

03

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

(a) Quarterly Reports:

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

Termination Report (TER)

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

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

Election on / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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

Type or Print Name of Treasurer Marsha Manning

Signature of Treasurer Marsha Manning

[Electronically Filed]

Date

/ /

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

BOB DINGETHAL FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	7384.34	7384.34
(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)).....	7384.34	7384.34
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	6932.73	6932.73
(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)).....	6932.73	6932.73
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2827.56	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	2375.95	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

BOB DINGETHAL FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6759.34	6759.34
(ii) Unitemized.....	625.00	625.00
(iii) TOTAL of contributions from individuals ▶	7384.34	7384.34
(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))..	7384.34	7384.34
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	2375.95	2375.95
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	2375.95	2375.95
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	9760.29	9760.29

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6932.73	6932.73
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	6932.73	6932.73

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	9760.29
25. SUBTOTAL (add Line 23 and Line 24).....	9760.29
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6932.73
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2827.56

**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 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Petros Bournelis

Mailing Address 1423 NE 128th Ave

City Vancouver State WA Zip Code 98684

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

Name of Employer Retired Occupation none

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2013

Transaction ID : SA11AI.4174

Amount of Each Receipt this Period
 250.00

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

Mailing Address 1423 NE 128th Ave

City Vancouver State WA Zip Code 98684

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

Name of Employer Retired Occupation None

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2013

Transaction ID : SA11AI.4176

Amount of Each Receipt this Period
 250.00

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

Mailing Address 4000 Wexford Dr

City Kensington State MD Zip Code 20895

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

Name of Employer Credit Union Association Occupation Economist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2013

Transaction ID : SA11AI.4178

Amount of Each Receipt this Period
 1000.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BOB E DINGETHAL

Mailing Address 17811 NW 56TH AVE

City: RIDGEFIELD State: WA Zip Code: 98642

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

Name of Employer: Gifford Pinchot Task Force Occupation: Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 804.80

Date of Receipt: 10 / 26 / 2013

Transaction ID : SA11AI.5570

Amount of Each Receipt this Period: 804.80

In-kind - Bob - Exploratory DC trip

B. Full Name (Last, First, Middle Initial)
BOB E DINGETHAL

Mailing Address 17811 NW 56TH AVE

City: RIDGEFIELD State: WA Zip Code: 98642

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

Name of Employer: Gifford Pinchot Task Force Occupation: Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 4085.29

Date of Receipt: 12 / 31 / 2013

Transaction ID : SA11AI.5639

Amount of Each Receipt this Period: 904.54

In-kind - Bob - Exploratory 2013 exp

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

Mailing Address 1708 NW Gregory Dr

City: Vancouver State: WA Zip Code: 98665

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

Name of Employer: Omega Industries Occupation: Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 11 / 20 / 2013

Transaction ID : SA11AI.4110

Amount of Each Receipt this Period: 500.00

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

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

2209.34

**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 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Isodoras Garifalakis

Mailing Address 1708 NW Gregory Dr

City Vancouver State WA Zip Code 98665

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

Name of Employer Omega Industries Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : SA11AI.4158

Amount of Each Receipt this Period
150.00

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

Mailing Address 1708 NW Gregory Dr

City Vancouver State WA Zip Code 98665-6004

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

Name of Employer Maria's Properties Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2013

Transaction ID : SA11AI.4155

Amount of Each Receipt this Period
500.00

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

Mailing Address 1708 NW Gregory Dr

City Vancouver State WA Zip Code 98665-6004

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

Name of Employer Maria's Properties Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : SA11AI.4171

Amount of Each Receipt this Period
150.00

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

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

800.00

**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 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

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

Mailing Address 208 Via La Circula

City Redondo Beach State CA Zip Code 90277

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

Name of Employer David Kaufman Painting & Decor Occupation Painter

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 14 / 2013

Transaction ID : SA11AI.4104

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
North American Shipping Agencies LLC

Mailing Address 17230 NE Irving St

City Portland State OR Zip Code 97230

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 20 / 2013

Transaction ID : SA11AI.4180

Amount of Each Receipt this Period
500.00

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

Mailing Address 18616 SE 14th Cir

City Vancouver State WA Zip Code 98663

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

Name of Employer Stefanos Vertopoulos & Assoc Occupation Insurance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 20 / 2013

Transaction ID : SA11AI.4172

Amount of Each Receipt this Period
250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 30
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

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

Mailing Address 226 Canyon Woods Way
Apt A

City San Ramon State CA Zip Code 94582

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

Name of Employer Praxis Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2013

Transaction ID : SA11Al.4136

Amount of Each Receipt this Period
 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

6759.34

**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 30
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BOB E DINGETHAL

Mailing Address 17811 NW 56TH AVE

City Ridgefield State WA Zip Code 98642

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

Name of Employer Gifford Pinchot Task Force Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 980.75

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 14 / 2013

Transaction ID : SA13A.4131

Amount of Each Receipt this Period
 _____ 175.95

Misc cash from personal expense check to open acct

B. Full Name (Last, First, Middle Initial)
BOB E DINGETHAL

Mailing Address 17811 NW 56TH AVE

City Ridgefield State WA Zip Code 98642

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

Name of Employer Gifford Pinchot Task Force Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2980.75

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 02 / 2013

Transaction ID : SA13A.4130

Amount of Each Receipt this Period
 _____ 2000.00

Working cash

C. Full Name (Last, First, Middle Initial)
BOB E DINGETHAL

Mailing Address 17811 NW 56TH AVE

City Ridgefield State WA Zip Code 98642

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

Name of Employer Gifford Pinchot Task Force Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 3180.75

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2013

Transaction ID : SA13A.4150

Amount of Each Receipt this Period
 _____ 200.00

Misc cash

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

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

_____ 2375.95

_____ 2375.95

**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 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BlueHost		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 560 Timpanogos Pkwy		Amount of Each Disbursement this Period 239.40 Transaction ID : SB17.4123
City Orem	State UT	
Purpose of Disbursement Web hosting - annual		Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) B. BOB E DINGETHAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2013
Mailing Address 17811 NW 56TH AVE		Amount of Each Disbursement this Period 804.80 Transaction ID : SB17.5573
City RIDGEFIELD	State WA	
Purpose of Disbursement In-kind - Bob - Exploratory DC trip		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) C. BOB E DINGETHAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 17811 NW 56TH AVE		Amount of Each Disbursement this Period 904.54 Transaction ID : SB17.5652
City RIDGEFIELD	State WA	
Purpose of Disbursement In-kind - Bob - Exploratory 2013 exp		Category/ Type 003
Candidate Name BOB DINGETHAL FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

SUBTOTAL of Disbursements This Page (optional).....	1948.74
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 30	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Justin H. 'Jay' Clark		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 3100 SE 168th Ave Apt 142		Amount of Each Disbursement this Period 599.00 Transaction ID : SB17.4126
City Vancouver State WA Zip Code 98683	Purpose of Disbursement Fundraising consulting Category/Type 003	
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) B. Path to Victory Consulting		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 3439 NE Sandy #642		Amount of Each Disbursement this Period 4373.00 Transaction ID : SB17.4119
City Portland State OR Zip Code 97232	Purpose of Disbursement Exploratory consulting Category/Type 001	
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

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

SUBTOTAL of Disbursements This Page (optional).....	4972.00
TOTAL This Period (last page this line number only).....	6920.74

**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 30
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Alaska Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address 7000 NE Airport Way		Amount of Each Disbursement this Period 399.80
City Portland	State OR	
Zip Code 97218	Purpose of Disbursement In-kind from Bob - exploratory DC Trip	Transaction ID : SB21.6313 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

Full Name (Last, First, Middle Initial) B. Alaska Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 7000 NE Airport Way		Amount of Each Disbursement this Period 20.00
City Portland	State OR	
Zip Code 97218	Purpose of Disbursement In-kind - Bob - exploratory DC trip - luggage	Transaction ID : SB21.6319 [MEMO ITEM]
Candidate Name	Category/ Type 002	
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. Alaska Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 7000 NE Airport Way		Amount of Each Disbursement this Period 6.00
City Portland	State OR	
Zip Code 97218	Purpose of Disbursement In-kind - Bob - exploratory DC trip - food	Transaction ID : SB21.6325 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 30			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Alaska Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2013
Mailing Address 7000 NE Airport Way		Amount of Each Disbursement this Period 7.00
City Portland	State OR	
Zip Code 97218	Purpose of Disbursement In-kind - Bob - exploratory DC trip - travel	Transaction ID : SB21.6338 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) B. Alaska Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2013
Mailing Address 7000 NE Airport Way		Amount of Each Disbursement this Period 20.00
City Portland	State OR	
Zip Code 97218	Purpose of Disbursement In-kind - Bob - exploratory DC trip - travel	Transaction ID : SB21.6339 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) c. Beaches Restaurant		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2013
Mailing Address 1919 SE Columbia River Dr		Amount of Each Disbursement this Period 33.00
City Vancouver	State WA	
Zip Code 98661	Purpose of Disbursement In-kind Bob - exploratory mtg exp	Transaction ID : SB21.6342 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 30
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Blue Top Cab		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address n/a		Amount of Each Disbursement this Period 15.00
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement In-kind - Bob - exploratory DC trip - travel	Transaction ID : SB21.6331 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) B. Brickhouse Bar & Grill		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 109 W 15th St		Amount of Each Disbursement this Period 13.00
City Vancouver	State WA	
Zip Code 98660	Purpose of Disbursement In-kind Bob - exploratory mtg exp	Transaction ID : SB21.6352 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) c. Bullfeathers		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2013
Mailing Address 410 First St SE		Amount of Each Disbursement this Period 11.55
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement In-kind - Bob - exploratory DC trip - food	Transaction ID : SB21.6328 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 30			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capital Image		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2013
Mailing Address Reagan Airport		Amount of Each Disbursement this Period 10.59
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement In-kind - Bob - exploratory DC trip	Transaction ID : SB21.6336
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: WA	District: 03	

Full Name (Last, First, Middle Initial) B. City of Vancouver		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 415 W 6th St		Amount of Each Disbursement this Period 1.00
City Vancouver	State WA	
Zip Code 98660	Purpose of Disbursement In-kind Bob - exploratory mtg exp	Transaction ID : SB21.6357
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 003	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: WA	District: 03	

Full Name (Last, First, Middle Initial) c. Coffee People		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address Airport		Amount of Each Disbursement this Period 3.85
City Portland	State OR	
Zip Code 97218	Purpose of Disbursement In-kind - Bob - exploratory DC Trip	Transaction ID : SB21.6315
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 002	
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: WA	District: 03	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 30			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Crave Grill		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2013
Mailing Address 13025 NE 4th Plain Rd		Amount of Each Disbursement this Period 26.56
City Vancouver State WA Zip Code 98682	Category/Type 003	
Purpose of Disbursement In-kind Bob - exploratory mtg exp		Transaction ID : SB21.6354 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. CycleLife USA		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 3255 K Street NW		Amount of Each Disbursement this Period 5.29
City Washington State DC Zip Code 20007	Category/Type 002	
Purpose of Disbursement In-kind - Bob - exploratory DC trip - travel		Transaction ID : SB21.6332 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Don Pedros		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 601 NE Hwy 99		Amount of Each Disbursement this Period 12.88
City Vancouver State WA Zip Code 98665	Category/Type 003	
Purpose of Disbursement In-kind Bob - exploratory mtg exp - food		Transaction ID : SB21.6350 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 30			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Elmer's		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address 7105 NE 40th St		Amount of Each Disbursement this Period 14.00
City Vancouver	State WA	
Zip Code 98661	Purpose of Disbursement In-kind Bob - exploratory mtg exp	Transaction ID : SB21.6345
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: WA District: 03		

Full Name (Last, First, Middle Initial) B. Farrar's Bistro		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 12514 NW 36th Ave		Amount of Each Disbursement this Period 88.00
City Vancouver	State WA	
Zip Code 98685	Purpose of Disbursement In-kind Bob - exploratory mtg exp	Transaction ID : SB21.6353
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: WA District: 03		

Full Name (Last, First, Middle Initial) c. Gas & Food		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 604 NE 179th St		Amount of Each Disbursement this Period 50.00
City Ridgefield	State WA	
Zip Code 98642	Purpose of Disbursement In-kind Bob - exploratory mtg exp	Transaction ID : SB21.6341
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: WA District: 03		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 30
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gas & Food		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2013
Mailing Address 604 NE 179th St		Amount of Each Disbursement this Period 31.67
City Ridgefield	State WA	Zip Code 98642
Purpose of Disbursement In-kind Bob - exploratory mtg exp	Category/ Type 003	Transaction ID : SB21.6347
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: WA District: 03	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. Jemstone Chevron		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2013
Mailing Address 9414 Van Mall Dr		Amount of Each Disbursement this Period 44.07
City Vancouver	State WA	Zip Code 98662
Purpose of Disbursement In-kind Bob - exploratory mtg exp	Category/ Type 002	Transaction ID : SB21.6365
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: WA District: 03	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) c. Longworth Cafe		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2013
Mailing Address Longworth House Office Bldg		Amount of Each Disbursement this Period 2.90
City Washington	State DC	Zip Code 20515
Purpose of Disbursement In-kind - Bob - exploratory DC trip - food	Category/ Type 002	Transaction ID : SB21.6326
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: WA District: 03	[MEMO ITEM]	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 30	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Olympic Provisions NW		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2013
Mailing Address 1632 NW Thurman		Amount of Each Disbursement this Period 83.00
City Portland	State OR	
Zip Code 97209	Purpose of Disbursement In-kind Bob - exploratory mtg exp	Transaction ID : SB21.6344 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) B. P.F. Changes		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 11301 Rickville Pike		Amount of Each Disbursement this Period 50.00
City N. Bethesda	State MD	
Zip Code 20895	Purpose of Disbursement In-kind - Bob - exploratory DC trip - food	Transaction ID : SB21.6330 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) c. Papa Murphy's		Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2013
Mailing Address 10501 NE Hwy 99		Amount of Each Disbursement this Period 10.84
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement In-kind Bob - exploratory mtg exp	Transaction ID : SB21.6343 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 30			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Peachtree		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address 6600 NW Hwy 99		Amount of Each Disbursement this Period 27.00
City Vancouver	State WA	
Purpose of Disbursement In-kind Bob - exploratory mtg exp	Category/ Type 003	Transaction ID : SB21.6359 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

Full Name (Last, First, Middle Initial) B. Peachtree		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 6600 NW Hwy 99		Amount of Each Disbursement this Period 46.00
City Vancouver	State WA	
Purpose of Disbursement In-kind Bob - exploratory mtg exp	Category/ Type 003	Transaction ID : SB21.6364 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

Full Name (Last, First, Middle Initial) c. Peking Garden		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 2101 Main St		Amount of Each Disbursement this Period 48.28
City Vancouver	State WA	
Purpose of Disbursement In-kind Bob - exploratory mtg exp	Category/ Type 003	Transaction ID : SB21.6346 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 30	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Potbelly Sandwich Works		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 1900 L Street NW		Amount of Each Disbursement this Period 9.02
City Washington State DC Zip Code 20001	Purpose of Disbursement In-kind - Bob - exploratory DC trip - food	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB21.6334 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 002		

Full Name (Last, First, Middle Initial) B. Roy Rogers		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2013
Mailing Address 203 Frederick Rd		Amount of Each Disbursement this Period 16.30
City Thurmont State MD Zip Code 21788	Purpose of Disbursement In-kind - Bob - exploratory DC trip - food	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB21.6337 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 002		

Full Name (Last, First, Middle Initial) c. Rusty Scupper		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 402 Key Hwy		Amount of Each Disbursement this Period 205.00
City Baltimore State MD Zip Code 21230	Purpose of Disbursement In-kind - Bob - exploratory DC trip - food	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB21.6335 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 002		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 30	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Safeway		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2013
Mailing Address 13023 NE Hwy 99		Amount of Each Disbursement this Period 39.86
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement In-kind Bob - exploratory mtg exp	Transaction ID : SB21.6349 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

Full Name (Last, First, Middle Initial) B. Safeway		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 13023 NE Hwy 99		Amount of Each Disbursement this Period 43.61
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement In-kind Bob - exploratory mtg exp	Transaction ID : SB21.6356 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

Full Name (Last, First, Middle Initial) c. Safeway-Longview		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 2930 Ocean Beach Hwy		Amount of Each Disbursement this Period 27.46
City Longview	State WA	
Zip Code 98632	Purpose of Disbursement In-kind Bob - exploratory mtg exp	Transaction ID : SB21.6362 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 30			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Safeway-Woodland		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2013
Mailing Address 725 Pacific Ave		Amount of Each Disbursement this Period 40.50
City Woodland State WA Zip Code 98674	Purpose of Disbursement In-kind Bob - exploratory mtg exp	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB21.6348 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03	Category/Type 002	

Full Name (Last, First, Middle Initial) B. Safeway-Woodland		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 725 Pacific Ave		Amount of Each Disbursement this Period 41.60
City Woodland State WA Zip Code 98674	Purpose of Disbursement In-kind Bob - exploratory mtg exp	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB21.6361 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03	Category/Type 002	

Full Name (Last, First, Middle Initial) c. Shell		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2013
Mailing Address 12604 NW 36th Ave		Amount of Each Disbursement this Period 44.41
City Vancouver State WA Zip Code 98685	Purpose of Disbursement In-kind Bob - exploratory mtg exp	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB21.6360 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03	Category/Type 002	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 30			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SmartPark		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 720 NW Lovejoy Ct		Amount of Each Disbursement this Period 7.00
City Portland	State OR	
Zip Code 97201	Purpose of Disbursement In-kind Bob - exploratory mtg exp	Transaction ID : SB21.6355 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) B. Starbucks		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 7720 NE Hwy 99		Amount of Each Disbursement this Period 10.87
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement In-kind Bob - exploratory mtg exp	Transaction ID : SB21.6351 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) c. Tigers Garden		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2013
Mailing Address 312 W 8th St		Amount of Each Disbursement this Period 39.00
City Vancouver	State WA	
Zip Code 98660	Purpose of Disbursement In-kind Bob - exploratory mtg exp	Transaction ID : SB21.6358 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 30	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Union 76		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 5715 NW 15th Ave		Amount of Each Disbursement this Period 44.93
City Seattle	State WA	
Zip Code 98109	Purpose of Disbursement In-kind Bob - exploratory mtg exp	Transaction ID : SB21.6363 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

Full Name (Last, First, Middle Initial) B. WA Metro Area Transit		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2013
Mailing Address 600 5th St NW		Amount of Each Disbursement this Period 7.50
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement In-kind - Bob - exploratory DC trip - travel	Transaction ID : SB21.6327 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 002	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

Full Name (Last, First, Middle Initial) c. Who Song & Larry's		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2013
Mailing Address 111 E Columbia River Way		Amount of Each Disbursement this Period 36.00
City Vancouver	State WA	
Zip Code 98661	Purpose of Disbursement In-kind Bob - exploratory mtg exp	Transaction ID : SB21.6340 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/ Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 30	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WMATA		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2013
Mailing Address 600 5th St NW		Amount of Each Disbursement this Period 5.00
City Washington State DC Zip Code 20001	Purpose of Disbursement In-kind - Bob - exploratory DC trip - travel	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB21.6322 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 002		

Full Name (Last, First, Middle Initial) B. WMATA		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 600 5th St NW		Amount of Each Disbursement this Period 5.00
City Washington State DC Zip Code 20001	Purpose of Disbursement In-kind - Bob - exploratory DC trip - travel	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB21.6329 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 002		

Full Name (Last, First, Middle Initial) C. WMATA		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 600 5th St NW		Amount of Each Disbursement this Period 5.00
City Washington State DC Zip Code 20001	Purpose of Disbursement In-kind - Bob - exploratory DC trip - travel	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB21.6333 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 002		

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

SCHEDULE C (FEC Form 3)
LOANS

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

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

City	State	ZIP Code
RIDGEFIELD	WA	98642

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

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	11 ^M / 14 ^D / 2013	11/1/2014	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4130**
BOB DINGETHAL FOR CONGRESS

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

City	State	ZIP Code
RIDGEFIELD	WA	98642

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

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 02 / Y 2013	M / D / Y 11/1/2014	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

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

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

**SCHEDULE C (FEC Form 3)
LOANS**

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

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

City	State	ZIP Code
RIDGEFIELD	WA	98642

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

TERMS

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

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

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

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

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