

# 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
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	61553.92	162544.28
(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)) .....	61553.92	162544.28
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	50954.84	134262.53
(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)).....	50954.84	134262.53
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>		
	30657.70	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>		
	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>		
	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).....	43417.71	114474.24
(ii) Unitemized.....	17960.82	44038.43
(iii) TOTAL of contributions from individuals ▶	61378.53	158512.67
(b) Political Party Committees.....	0.00	130.67
(c) Other Political Committees (such as PACs).....	0.00	50.00
(d) The Candidate.....	175.39	3850.94
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	61553.92	162544.28
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	2375.95
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	2375.95
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	61553.92	164920.23

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	50954.84	134262.53
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	50954.84	134262.53

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	20058.62
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	61553.92
25. SUBTOTAL (add Line 23 and Line 24).....	81612.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	50954.84
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	30657.70

**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 76
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

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

Mailing Address 3801 NE 172nd Ave

City Vancouver State WA Zip Code 98682

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230.91**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 23 / 2014**

**Transaction ID : SA11AI.5972**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Kathleen Anamosa**

Mailing Address 3414 SE 170th Ave

City Vancouver State WA Zip Code 98683

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 25 / 2014**

**Transaction ID : SA11AI.6268**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Theresa Bakker**

Mailing Address 5603 NW 179th St

City Ridgefield State WA Zip Code 98642

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

Name of Employer Accountant Occupation O'Learys Tax Service Ltd

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  
**09 / 30 / 2014**

**Transaction ID : SA11AI.6816**

Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>625.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 76
	<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)  
**Jan Baldwin**

Mailing Address 3705 NE Everett St

City Camas State WA Zip Code 98607

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 17 / 2014

**Transaction ID : SA11AI.6621**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Judy Baldwin**

Mailing Address 3705 NE Everett St

City Camas State WA Zip Code 98607

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 17 / 2014

**Transaction ID : SA11AI.6619**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Norman Banks**

Mailing Address 12214 NW 21st Ave

City Vancouver State WA Zip Code 98685

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
280.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : SA11AI.5999**

Amount of Each Receipt this Period  
30.00

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

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

530.00

**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 76
	<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 Beckley**

Mailing Address 3210 SE 154th Ave

City Vancouver State WA Zip Code 98683

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **452.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : SA11AI.6057**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**John Bishop**

Mailing Address 14333 NE 87th Ave

City Vancouver State WA Zip Code 98662

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

Name of Employer WSU Occupation Educator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2014

**Transaction ID : SA11AI.6642**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 308 NW 25th Pl

City Battle Ground State WA Zip Code 98604

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

Name of Employer None Occupation Unemployed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **564.45**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 11 / 2014

**Transaction ID : SA11AI.6594**

Amount of Each Receipt this Period  
**25.00**

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

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

**475.00**

**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 76
	<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**

Full Name (Last, First, Middle Initial) <b>A. Stephen Brownell</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2014
Mailing Address 306 Provencal Rd		<b>Transaction ID : SA11AI.6767</b>
City Grosse Pointe Farms	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer The Kirlin Co	Occupation Vice Pres	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>B. Douglas Charters</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 12 / 2014
Mailing Address PO Box 1655		<b>Transaction ID : SA11AI.6229</b>
City White Salmon	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer S-D-S Lumber	Occupation Mechanic	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>C. Douglas Charters</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 10 / 2014
Mailing Address PO Box 1655		<b>Transaction ID : SA11AI.6589</b>
City White Salmon	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer S-D-S Lumber	Occupation Mechanic	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 76
	<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**

Full Name (Last, First, Middle Initial) <b>A. Robert L Cohen</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2014	
Mailing Address 13320 NE 42nd Ave		<b>Transaction ID : SA11AI.6493</b>	
City Vancouver	State WA	Zip Code 98686	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee.		C	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 350.00		

Full Name (Last, First, Middle Initial) <b>B. Ed Cote</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2014	
Mailing Address 4608 NW Olive St		<b>Transaction ID : SA11AI.6582</b>	
City Vancouver	State WA	Zip Code 98663	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee.		C	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 350.00		

Full Name (Last, First, Middle Initial) <b>C. Timothy J Dawdy</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014	
Mailing Address 703 E Shobert St		<b>Transaction ID : SA11AI.6759</b>	
City Ridgefield	State WA	Zip Code 98642	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee.		C	
Name of Employer City of Ridgefield	Occupation Firefighter		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 300.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

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

FOR LINE NUMBER: PAGE 10 OF 76  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Loretta DeKay**

Mailing Address 1440 SW Brislaw Loop Rd

City State Zip Code  
White Salmon WA 98672

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.6643**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Ben Dennis**

Mailing Address 2001 NW 127th St

City State Zip Code  
Vancouver WA 98685

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.6550**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Dona Dingethal**

Mailing Address 17811 NW 56th Ave

City State Zip Code  
Ridgefield WA 98642

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Korab USA LLC Customer Service

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11AI.6733**

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 76
	<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)  
**Richard Dyrland**

Mailing Address 27511 NE 29th Ave

City State Zip Code  
Ridgefield WA 98642-9109

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 12 / 2014

**Transaction ID : SA11AI.6223**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Greg Flakus**

Mailing Address 13111 NE 5th Ave

City State Zip Code  
Vancouver WA 98685

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

Name of Employer Occupation  
GF Strategies President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 29 / 2014

**Transaction ID : SA11AI.6738**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Gretchen Frasier**

Mailing Address PO Box 872167

City State Zip Code  
Vancouver WA 98687

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 30 / 2014

**Transaction ID : SA11AI.6835**

Amount of Each Receipt this Period  
300.00

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

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

500.00

**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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 12 OF 76

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NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Russell Freeland**

Mailing Address 9212 NW 25th Ave

City Vancouver State WA Zip Code 98665

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 27 / 2014

**Transaction ID : SA11AI.6012**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 17146 SE 23rd Dr

City Vancouver State WA Zip Code 98683

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : SA11AI.6734**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Philip Furno**

Mailing Address 9303 NE 82nd Ct

City Vancouver State WA Zip Code 98662

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : SA11AI.6700**

Amount of Each Receipt this Period  
 100.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 76
	<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)  
**Jim Gizzi**

Mailing Address 6804 NE 209th St

City State Zip Code  
Battle Ground WA 98604

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

Name of Employer Occupation  
Self Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 05 / 2014

**Transaction ID : SA11AI.6532**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Kelli Gizzi**

Mailing Address 6804 NE 209th St

City State Zip Code  
Battle Ground WA 98604

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

Name of Employer Occupation  
Intel Corp Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 05 / 2014

**Transaction ID : SA11AI.6533**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Guy Glenn**

Mailing Address 15808 Sandridge Rd

City State Zip Code  
Long Beach WA 98631

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

Name of Employer Occupation  
Guy Glenn Law Firm Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : SA11AI.6664**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 76
	<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**

Full Name (Last, First, Middle Initial) <b>A. Linda Greep</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014	
Mailing Address 1908 SE 158th Ave		<b>Transaction ID : SA11AI.6741</b>	
City Vancouver	State WA	Zip Code 98683	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 425.00		

Full Name (Last, First, Middle Initial) <b>B. Michael Greer</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014	
Mailing Address 112 16th NE		<b>Transaction ID : SA11AI.6694</b>	
City Long Beach	State WA	Zip Code 98631	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee.		C	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 225.00		

Full Name (Last, First, Middle Initial) <b>C. William Grennan</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014	
Mailing Address PO Box 541		<b>Transaction ID : SA11AI.6657</b>	
City Long Beach	State WA	Zip Code 98631	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee.		C	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 240.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 450.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 76
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

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

Mailing Address 10006 NE 36th Ct

City Vancouver State WA Zip Code 98686

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

Name of Employer Self Occupation Writer-Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3995.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.6929**

Amount of Each Receipt this Period  
1500.00

In-kind - research/consulting

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

Mailing Address 11300 NW 34th Ave

City Vancouver State WA Zip Code 98685

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 22 / 2014

**Transaction ID : SA11AI.6629**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**IBEW PAC Voluntary Fund**

Mailing Address 900 Seventh St NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : SA11AI.6164**

Amount of Each Receipt this Period  
2500.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 76
	<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)  
**IBEW PAC Voluntary Fund**

Mailing Address 900 Seventh St NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 05 / 2014

**Transaction ID : SA11AI.6497**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**ILWU Longview Pension Group**

Mailing Address 617 14th Ave

City Longview State WA Zip Code 98632

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

Name of Employer Occupation

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  
 09 / 16 / 2014

**Transaction ID : SA11AI.6607**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 16516 NE 27th Court

City Ridgefield State WA Zip Code 98642

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

Name of Employer Occupation  
ManorCare RN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
408.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : SA11AI.6775**

Amount of Each Receipt this Period  
100.00

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

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

2850.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 76
	<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)  
**Walt Jones**

Mailing Address 116 Ridgecrest Dr

City Longview State WA Zip Code 98632

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 22 / 2014

**Transaction ID : SA11AI.6630**

Amount of Each Receipt this Period  
**100.00**

**B.** 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 **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : SA11AI.6724**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 501 Bishop Rd

City Washougal State WA Zip Code 98671

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

Name of Employer International Assoc Machinists Occupation Business Rep

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : SA11AI.6706**

Amount of Each Receipt this Period  
**250.00**

**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 18 OF 76
	<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)  
**Suzanne Kendall**

Mailing Address 3808 SE 142nd Ct

City Vancouver State WA Zip Code 98683

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3395.67

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 04 / 2014

**Transaction ID : SA11AI.6931**

Amount of Each Receipt this Period  
995.67

In-kind - food, banner, stickers

**B.** Full Name (Last, First, Middle Initial)  
**Suzanne Kendall**

Mailing Address 3808 SE 142nd Ct

City Vancouver State WA Zip Code 98683

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4995.67

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 08 / 2014

**Transaction ID : SA11AI.6563**

Amount of Each Receipt this Period  
1600.00

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

Mailing Address 4000 NE 128th St

City Vancouver State WA Zip Code 98686

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

Name of Employer Klineco Enterprises Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 05 / 2014

**Transaction ID : SA11AI.6506**

Amount of Each Receipt this Period  
250.00

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

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

2845.67

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 76
	<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**

Full Name (Last, First, Middle Initial) <b>A. Veronica Kline</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2014	
Mailing Address 4000 NE 128th St		<b>Transaction ID : SA11AI.6507</b>	
City Vancouver	State WA	Zip Code 98686	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer None	Occupation Homemaker		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. Robert Kustel</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 21 / 2014	
Mailing Address 409 Magee Ave		<b>Transaction ID : SA11AI.6255</b>	
City Mill Valley	State CA	Zip Code 94941	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>C. Jacqueline Lane</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2014	
Mailing Address 24203 NE 59th Ave		<b>Transaction ID : SA11AI.6559</b>	
City Battle Ground	State WA	Zip Code 98604	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer Wells Fargo Bank	Occupation Technology Mgr		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	[ ]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 76
	<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)  
**Kathleen Lawrence**

Mailing Address 6522 Jordan Way

City Vancouver State WA Zip Code 98665

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.6808**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Matthew Logan**

Mailing Address 29807 NE 51st Way

City Camas State WA Zip Code 98607

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

Name of Employer Federal Government Occupation Hydrologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 21 / 2014

**Transaction ID : SA11AI.5985**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Doug Long**

Mailing Address 3630 NW 2nd ve

City Camas State WA Zip Code 98607

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
290.00

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

**Transaction ID : SA11AI.6566**

Amount of Each Receipt this Period  
100.00

**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 21 OF 76
	<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)  
**Long Beach Commercial Security**

Mailing Address PO Box 977

City Long Beach State WA Zip Code 98631

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : SA11AI.6675**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2215 NW Coyote Ridge Rd

City La Center State WA Zip Code 98629

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : SA11AI.6197**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 3801 NE 172nd Ave

City Vancouver State WA Zip Code 98682

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

Name of Employer Occupation  
Self Accounting & Consulting

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : SA11AI.6132**

Amount of Each Receipt this Period  
400.00  
In-kind - accounting work

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

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

1650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 76
	<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)  
**Marsha Manning**

Mailing Address 3801 NE 172nd Ave

City Vancouver State WA Zip Code 98682

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

Name of Employer Self Occupation Accounting & Consulting

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : SA11AI.6474**

Amount of Each Receipt this Period  
100.00

In-kind - Acct Aug partial

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

Mailing Address 3801 NE 172nd Ave

City Vancouver State WA Zip Code 98682

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

Name of Employer Self Occupation Accounting & Consulting

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 30 / 2014

**Transaction ID : SA11AI.6475**

Amount of Each Receipt this Period  
400.00

In-kind - Acct - Aug final

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

Mailing Address 3801 NE 172nd Ave

City Vancouver State WA Zip Code 98682

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

Name of Employer Self Occupation Accounting & Consulting

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.6925**

Amount of Each Receipt this Period  
500.00

In-kind - Accounting

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 76
	<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)  
**Maria's Properties**

Mailing Address 10013 Hwy 99

City Vancouver State WA Zip Code 98665

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 31 / 2014

**Transaction ID : SA11AI.6131**

Amount of Each Receipt this Period  
600.00  
In-kind - Rent for main office

**B.** Full Name (Last, First, Middle Initial)  
**Maria's Properties**

Mailing Address 10013 Hwy 99

City Vancouver State WA Zip Code 98665

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : SA11AI.6468**

Amount of Each Receipt this Period  
150.00  
In-kind - Vanc office partial Aug

**C.** Full Name (Last, First, Middle Initial)  
**Maria's Properties**

Mailing Address 10013 Hwy 99

City Vancouver State WA Zip Code 98665

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 30 / 2014

**Transaction ID : SA11AI.6469**

Amount of Each Receipt this Period  
450.00  
In-kind - Vanc rent - Aug partial

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 76
	<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. Maria's Properties**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10013 Hwy 99  
 City Vancouver State WA Zip Code 98665  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 3600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11AI.6924**  
 Amount of Each Receipt this Period  
 600.00  
 In-kind - Office rent - Vancouver

**B. Linda McLain**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7410 NW 16th Ave  
 City Vancouver State WA Zip Code 98665  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 Currie & McLain P.S. CPA  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2014  
**Transaction ID : SA11AI.6187**  
 Amount of Each Receipt this Period  
 50.00

**C. Roger Mellem**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5711 26th Ave NW  
 City Seattle State WA Zip Code 98107  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 Ryan Swanson & Cleveland Attorney  
 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  
 08 / 25 / 2014  
**Transaction ID : SA11AI.6267**  
 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 25 OF 76
	<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)  
**Ginger Metcalf**

Mailing Address 400 W 8th St #402

City Vancouver State WA Zip Code 98660

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
525.00

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

**Transaction ID : SA11AI.6568**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Kent Meyer**

Mailing Address 8608 NW Old Orchard Dr

City Vancouver State WA Zip Code 98665

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
257.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 27 / 2014

**Transaction ID : SA11AI.6013**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Jim Moeller**

Mailing Address 4600 NW Harney St

City Vancouver State WA Zip Code 98663

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

Name of Employer Counselor Occupation Kaiser Permanente

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 05 / 2014

**Transaction ID : SA11AI.6535**

Amount of Each Receipt this Period  
50.00

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

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

650.00

**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 26 OF 76
	<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**

Full Name (Last, First, Middle Initial) <b>A. Catherine Morton</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 27 / 2014
Mailing Address 2698 N L St		<b>Transaction ID : SA11AI.6056</b>
City Washougal	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Self	Occupation Counselor	Amount of Each Receipt this Period 850.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>B. William Nelson</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 310 W 34th St		<b>Transaction ID : SA11AI.5997</b>
City Vancouver	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Baumgartner Nelson & Wagner	Occupation Lawyer	Amount of Each Receipt this Period 350.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>C. Nextnet</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address PO Box 68		<b>Transaction ID : SA11AI.6689</b>
City Washougal	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Amount of Each Receipt this Period 500.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	900.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 76
	<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)  
**Eric Olmsted**

Mailing Address 15912 NE 41st St

City Vancouver State WA Zip Code 98682

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

Name of Employer On-Line Support Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **602.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2014

**Transaction ID : SA11AI.6600**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 17111 NW 69th Ave

City Ridgefield State WA Zip Code 98642

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

Name of Employer Bubba Blue BBQ Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 05 / 2014

**Transaction ID : SA11AI.6538**

Amount of Each Receipt this Period  
**1250.00**

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

Mailing Address 17111 NW 69th Ave

City Ridgefield State WA Zip Code 98642

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

Name of Employer Bubba Blue BBQ Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 05 / 2014

**Transaction ID : SA11AI.6539**

Amount of Each Receipt this Period  
**1250.00**

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

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

**3000.00**

**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 28 OF 76
	<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**

Full Name (Last, First, Middle Initial) <b>Ali Parvas</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 30 / 2014	
Mailing Address 2440 W Lynnwood Dr		<b>Transaction ID : SA11Al.6460</b>	
City Longview	State WA	Zip Code 98632	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 900.00 In-kind - Office Longview	
Name of Employer Self	Occupation Property Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 900.00		

Full Name (Last, First, Middle Initial) <b>Ali Parvas</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2014	
Mailing Address 2440 W Lynnwood Dr		<b>Transaction ID : SA11Al.6466</b>	
City Longview	State WA	Zip Code 98632	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 550.00 In-kind - Longview rent - partial Aug	
Name of Employer Self	Occupation Property Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1450.00		

Full Name (Last, First, Middle Initial) <b>Ali Parvas</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 30 / 2014	
Mailing Address 2440 W Lynnwood Dr		<b>Transaction ID : SA11Al.6467</b>	
City Longview	State WA	Zip Code 98632	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00 In-kind - Longview rent - final Aug	
Name of Employer Self	Occupation Property Owner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1800.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1800.00
<b>TOTAL</b> This Period (last page this line number only).....	1800.00

**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 29 OF 76
	<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**

Full Name (Last, First, Middle Initial) <b>Ali Parvas</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2014
Mailing Address 2440 W Lynnwood Dr		<b>Transaction ID : SA11AI.6923</b>
City Longview	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 900.00 In-kind - Longview office rent
Name of Employer Self	Occupation Property Owner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

Full Name (Last, First, Middle Initial) <b>Sally S Paxton</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2014
Mailing Address 6583 156th Ave SE		<b>Transaction ID : SA11AI.6654</b>
City Bellevue	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) <b>Anne L Piper</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 29 / 2014
Mailing Address PO Box 397		<b>Transaction ID : SA11AI.6740</b>
City Salkum	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self	Occupation Rancher	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 76
	<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)  
**Pierre Provost**

Mailing Address 14617 SE Rivercrest Dr

City Vancouver State WA Zip Code 98683

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

Name of Employer Columbia Anesthesia Group Occupation Physician

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  
 08 / 17 / 2014

**Transaction ID : SA11AI.6248**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Sydney Reisbick**

Mailing Address PO Bjox 339

City Ridgefield State WA Zip Code 98642

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

Name of Employer Retired Occupation Retired

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  
 08 / 12 / 2014

**Transaction ID : SA11AI.6205**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Ernest Santner**

Mailing Address 14609 NE 7th St

City Vancouver State WA Zip Code 98684

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

Name of Employer Retired Occupation Retired

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  
 09 / 16 / 2014

**Transaction ID : SA11AI.6609**

Amount of Each Receipt this Period  
250.00

**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: PAGE 31 OF 76  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Kathleen Sayce**

Mailing Address 3603 296th Lane

City Nahcotta State WA Zip Code 98637

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 29 / 2014**

**Transaction ID : SA11AI.6676**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 15505 J Place

City Long Beach State WA Zip Code 98631

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 16 / 2014**

**Transaction ID : SA11AI.6615**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Eulalia Soto**

Mailing Address 11100 NE 11th Ave

City Vancovuer State WA Zip Code 98685

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**07 / 28 / 2014**

**Transaction ID : SA11AI.6034**

Amount of Each Receipt this Period  
**500.00**

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

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

**1200.00**

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

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

FOR LINE NUMBER: PAGE 32 OF 76  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Eulalia Soto**

Mailing Address 11100 NE 11th Ave

City Vancouver State WA Zip Code 98685

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : SA11AI.6829**

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
**Neil Stilin**

Mailing Address 12608 NW 46th Ave

City Vancouver State WA Zip Code 98685

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

Name of Employer Rexnord Industries Occupation Sales Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : SA11AI.6732**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Eric Strid**

Mailing Address PO Box 2028

City White Salmon State WA Zip Code 98672

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2014

**Transaction ID : SA11AI.6688**

Amount of Each Receipt this Period  
500.00

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

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

1000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 76
	<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**

Full Name (Last, First, Middle Initial) <b>A. Suzanne Turnauer</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 18809 SE 17th St		<b>Transaction ID : SA11AI.6031</b>
City Vancouver	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer None	Occupation Homemaker	Election Cycle-to-Date 400.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. UA Political Education Committee</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 3 Park Place		<b>Transaction ID : SA11AI.6839</b>
City Annapolis	State MD	
FEC ID number of contributing federal political committee. C C00012476		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Election Cycle-to-Date 5000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. United Food and Commercial Workers International Union Active Ballot Club</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 1775 K STREET N.W.		<b>Transaction ID : SA11AI.6637</b>
City WASHINGTON	State DC	
FEC ID number of contributing federal political committee. C C00002766		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Election Cycle-to-Date 10000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 34 OF 76

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NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jerry Wallace**  
 Mailing Address 110 Krestview Lane  
 City Woodland State WA Zip Code 98674  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WTB, Inc Occupation Construction  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 19 / 2014**  
**Transaction ID : SA11AI.6625**  
 Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**WA State Democratic Party**  
 Mailing Address PO Box 4027  
 City Seattle State WA Zip Code 98194  
 FEC ID number of contributing federal political committee. **C C00114439**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **2092.04**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 10 / 2014**  
**Transaction ID : SA11AI.6906**  
 Amount of Each Receipt this Period  
**2092.04**  
 In-kind - Voter file database

**C.** Full Name (Last, First, Middle Initial)  
**Holly J Williams**  
 Mailing Address 9715 SE Evergreen Hwy  
 City Vancouver State WA Zip Code 98664  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Gifford Pinchot Task Force Occupation Adminstrator  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **270.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 16 / 2014**  
**Transaction ID : SA11AI.6612**  
 Amount of Each Receipt this Period  
**100.00**

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

**2292.04**

**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 35 OF 76
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

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

Mailing Address 2621 NE 152nd Circle

City Vancouver State WA Zip Code 98686

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

Name of Employer EarthLink Occupation Telecommunications

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 28 / 2014

**Transaction ID : SA11AI.6083**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Paul Williams**

Mailing Address 2621 NE 152nd Circle

City Vancouver State WA Zip Code 98686

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

Name of Employer EarthLink Occupation Telecommunications

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 12 / 2014

**Transaction ID : SA11AI.6228**

Amount of Each Receipt this Period  
 100.00

**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).....

350.00

43417.71

**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 36 OF 76
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

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

Mailing Address **17811 NW 56TH AVE**

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

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3850.94**

Date of Receipt  
 /  /   
**07 / 30 / 2014**

**Transaction ID : SA11D.6949**

Amount of Each Receipt this Period  
 **175.39**

In-kind - Bob - prePrimary travel

**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  
 /  /

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  
 /  /

Amount of Each Receipt this Period

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

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

**175.39**

**175.39**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 76	
	<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) <b>A. Accelerated Postal &amp; Print</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 9208 NE Hwy 99, Ste 107		Amount of Each Disbursement this Period 162.17
City Vancouver State WA Zip Code 98665	Category/Type 001	
Purpose of Disbursement Kendall In-kind - banner for office		Transaction ID : SB17.6934 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ace Hardware</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address 600 Triangle Mall		Amount of Each Disbursement this Period 9.69
City Longview State WA Zip Code 98632	Category/Type 001	
Purpose of Disbursement Shepherd In-kind - Longivew office setup		Transaction ID : SB17.6915 <b>[MEMO ITEM]</b>
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) <b>c. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 12.90
City Phoenix State AZ Zip Code 85072	Category/Type 003	
Purpose of Disbursement CC Fees		Transaction ID : SB17.6307
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12.90
<b>TOTAL</b> 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 38 OF 76	
	<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) <b>A. American Express</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address PO Box 53852		Amount of Each Disbursement this Period 15.93 <b>Transaction ID : SB17.6859</b>
City Phoenix	State AZ	
Zip Code 85072	Purpose of Disbursement CC Fees	Category/ Type 003
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

Full Name (Last, First, Middle Initial) <b>B. Baja Fresh</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 7801 NE Hwy 99, Ste D		Amount of Each Disbursement this Period 23.56 <b>Transaction ID : SB17.6459</b> <b>[MEMO ITEM]</b>
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Bob In-kind Pre-Primary - office mtg	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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>c. Candy Bonneville Jr.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 308 NW 25th Pl		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : SB17.6866</b>
City Battle Ground	State WA	
Zip Code 98604	Purpose of Disbursement Staff payroll	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	765.93
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 76			
	<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) <b>A. Cash &amp; Carry</b>		Date of Disbursement MM / DD / YYYY 08 / 22 / 2014
Mailing Address 10611 NE 53rd St		Amount of Each Disbursement this Period 33.74
City Vancouver State WA Zip Code 98662	Purpose of Disbursement Parade candy Category/Type 007	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		<b>Transaction ID : SB17.6301</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Cash &amp; Carry</b>		Date of Disbursement MM / DD / YYYY 09 / 19 / 2014
Mailing Address 10611 NE 53rd St		Amount of Each Disbursement this Period 39.38
City Vancouver State WA Zip Code 98662	Purpose of Disbursement Candy for parade Category/Type 007	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		<b>Transaction ID : SB17.6879</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Christines Restaurant</b>		Date of Disbursement MM / DD / YYYY 07 / 18 / 2014
Mailing Address 2626 E Evergreen Blvd		Amount of Each Disbursement this Period 31.00
City Vancouver State WA Zip Code 98661	Purpose of Disbursement Bob In-kind Pre-Primary - fundraising Category/Type 003	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		<b>Transaction ID : SB17.6452</b> <b>[MEMO ITEM]</b>
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)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	73.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 76			
	<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) <b>A. City of Vancouver</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 415 W 6th St		Amount of Each Disbursement this Period 1.50
City Vancouver	State WA	
Zip Code 98660		[MEMO ITEM]
Purpose of Disbursement Bob In-kind Pre-Primary - parking		
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		
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>B. Clark Public Utilities</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address PO Box 8989		Amount of Each Disbursement this Period 61.19
City Vancouver	State WA	
Zip Code 98668		Category/ Type 001
Purpose of Disbursement Utilities - Vanc office		
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

Full Name (Last, First, Middle Initial) <b>c. Columbia Litho, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 302 NE Sxth Ave		Amount of Each Disbursement this Period 247.15
City Camas	State WA	
Zip Code 98607		Category/ Type 003
Purpose of Disbursement Printing - remits		
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	308.34
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 76			
	<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) <b>A. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2014
Mailing Address PO Box 34227		Amount of Each Disbursement this Period 510.60 <b>Transaction ID : SB17.6283</b>
City Seattle	State WA	
Zip Code 98124	Purpose of Disbursement Internet-Vanc office	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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>B. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address PO Box 34227		Amount of Each Disbursement this Period 245.10 <b>Transaction ID : SB17.6857</b>
City Seattle	State WA	
Zip Code 98124	Purpose of Disbursement Internet/Phones	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

Full Name (Last, First, Middle Initial) <b>c. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address PO Box 34227		Amount of Each Disbursement this Period 484.59 <b>Transaction ID : SB17.6868</b>
City Seattle	State WA	
Zip Code 98124	Purpose of Disbursement Internet/phones - Longview office	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1240.29
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 76	
	<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) <b>A. Cowlitz County Elections</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 204 4th Ave Rm 107		Amount of Each Disbursement this Period 9 . . . . . 10.80
City Kelso State WA Zip Code 98626	Purpose of Disbursement Shepherd In-kind - Longview Office setup - copies	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Category/Type 001	Transaction ID : SB17.6919  [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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Cowlitz County GIS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 207 N 4th Ave		Amount of Each Disbursement this Period 9 . . . . . 20.00
City Kelso State WA Zip Code 98626	Purpose of Disbursement Shepherd In-kind - Longview office setup - maps	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Category/Type 001	Transaction ID : SB17.6922  [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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Cowlitz PUD</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 961 12th		Amount of Each Disbursement this Period 9 . . . . . 94.76
City Longview State WA Zip Code 98632	Purpose of Disbursement Utilities - Cowlitz office	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Category/Type 001	Transaction ID : SB17.6861
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	94.76
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 76			
	<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) <b>A. Daily Insider</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2014
Mailing Address PO Box 2597		Amount of Each Disbursement this Period 450.00 <b>Transaction ID : SB17.6881</b>
City Vancouver	State WA	
Purpose of Disbursement Online advertising	Category/ Type 004	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

Full Name (Last, First, Middle Initial) <b>B. Tom Desmond</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 10506 NE 37th Ave		Amount of Each Disbursement this Period 41.80 <b>Transaction ID : SB17.6142</b>
City Vancouver	State WA	
Purpose of Disbursement Mileage reimbursement	Category/ Type 002	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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>c. Tom Desmond</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 10506 NE 37th Ave		Amount of Each Disbursement this Period 39.60 <b>Transaction ID : SB17.6150</b>
City Vancouver	State WA	
Purpose of Disbursement Reimburse travel exp - Longview	Category/ Type 002	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	531.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 76	
	<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) <b>A. Tom Desmond</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 10506 NE 37th Ave		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : SB17.6280</b>
City Vancouver State WA Zip Code 98686	Purpose of Disbursement Staff payroll 001 Category/Type	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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>B. Tom Desmond</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 10506 NE 37th Ave		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : SB17.6858</b>
City Vancouver State WA Zip Code 98686	Purpose of Disbursement Staff payroll 001 Category/Type	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) <b>C. BOB E DINGETHAL</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 17811 NW 56TH AVE		Amount of Each Disbursement this Period 362.45 <b>Transaction ID : SB17.6139</b>
City RIDGEFIELD State WA Zip Code 98642	Purpose of Disbursement Mileage reimbursement 002 Category/Type	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1862.45
<b>TOTAL</b> 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 45 OF 76	
	<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) <b>A. BOB E DINGETHAL</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 17811 NW 56TH AVE			Amount of Each Disbursement this Period .....,.....,.....,.....,.....,.....,.....,.....,.....,..... 104.55 <b>Transaction ID : SB17.6149</b>
City RIDGEFIELD	State WA	Zip Code 98642	
Purpose of Disbursement Reimburse travel exp		Category/ Type 002	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>			
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>B. BOB E DINGETHAL</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 17811 NW 56TH AVE			Amount of Each Disbursement this Period .....,.....,.....,.....,.....,.....,.....,.....,.....,..... 102.11 <b>Transaction ID : SB17.6284</b>
City RIDGEFIELD	State WA	Zip Code 98642	
Purpose of Disbursement Reimburse mileage		Category/ Type 002	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: WA District: 03			

Full Name (Last, First, Middle Initial) <b>C. BOB E DINGETHAL</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 17811 NW 56TH AVE			Amount of Each Disbursement this Period .....,.....,.....,.....,.....,.....,.....,.....,.....,..... 329.10 <b>Transaction ID : SB17.6296</b>
City RIDGEFIELD	State WA	Zip Code 98642	
Purpose of Disbursement Reimburse mileage		Category/ Type 002	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: WA District: 03			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	.....,.....,.....,.....,.....,.....,.....,.....,.....,..... 535.76
<b>TOTAL</b> 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 46 OF 76	
	<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) <b>A. BOB E DINGETHAL</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 17811 NW 56TH AVE		Amount of Each Disbursement this Period 505.03 <b>Transaction ID : SB17.6304</b>
City RIDGEFIELD	State WA	
Zip Code 98642	Purpose of Disbursement Reimburse mileage & travel exp	Category/ Type 002
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

Full Name (Last, First, Middle Initial) <b>B. BOB E DINGETHAL</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 17811 NW 56TH AVE		Amount of Each Disbursement this Period 562.68 <b>Transaction ID : SB17.6860</b>
City RIDGEFIELD	State WA	
Zip Code 98642	Purpose of Disbursement Mileage reimbursement	Category/ Type 002
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

Full Name (Last, First, Middle Initial) <b>C. BOB E DINGETHAL</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 17811 NW 56TH AVE		Amount of Each Disbursement this Period 311.28 <b>Transaction ID : SB17.6872</b>
City RIDGEFIELD	State WA	
Zip Code 98642	Purpose of Disbursement Reimburse mileage	Category/ Type 002
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1378.99
<b>TOTAL</b> 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 47 OF 76	
	<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) <b>A. BOB E DINGETHAL</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 17811 NW 56TH AVE		Amount of Each Disbursement this Period 420.16 <b>Transaction ID : SB17.6884</b>
City RIDGEFIELD	State WA	
Zip Code 98642	Purpose of Disbursement Reimburse mileage	Category/ Type 002
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

Full Name (Last, First, Middle Initial) <b>B. BOB E DINGETHAL</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2014
Mailing Address 17811 NW 56TH AVE		Amount of Each Disbursement this Period 362.76 <b>Transaction ID : SB17.6894</b>
City RIDGEFIELD	State WA	
Zip Code 98642	Purpose of Disbursement Reimburse mileage	Category/ Type 002
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

Full Name (Last, First, Middle Initial) <b>c. Robert E Dingethal</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 17811 NW 56TH AVE		Amount of Each Disbursement this Period 175.39 <b>Transaction ID : SB17.6950</b>
City RIDGEFIELD	State WA	
Zip Code 98642	Purpose of Disbursement In-kind - Bob - prePrimary travel	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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	958.31
<b>TOTAL</b> 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 48 OF 76	
	<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) <b>A. Fred Meyer - Hazel Dell</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 7700 Hwy 99		Amount of Each Disbursement this Period 10.93
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Bob In-Kind Pre-Primary - fundraising	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		Transaction ID : SB17.6456 <b>[MEMO ITEM]</b>
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>B. Fred Meyer - Tenney Rd</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 800 NE Tenney Rd		Amount of Each Disbursement this Period 15.05
City Vancouver State WA Zip Code 98685	Purpose of Disbursement Bob In-kind Pre-Primary - office supplies	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		Transaction ID : SB17.6451 <b>[MEMO ITEM]</b>
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>c. Fred Meyer - Tenney Rd</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 800 NE Tenney Rd		Amount of Each Disbursement this Period 28.43
City Vancouver State WA Zip Code 98685	Purpose of Disbursement Office supplies - Harrison purchase	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		Transaction ID : SB17.6865 <b>[MEMO ITEM]</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 49 OF 76	
	<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) <b>A. Peter Harrison</b>		Date of Disbursement MM / DD / YYYY 07 / 25 / 2014
Mailing Address 10006 NE 36th Ct		Amount of Each Disbursement this Period 133.54 <b>Transaction ID : SB17.6148</b>
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement Reimburse mileage to Goldendale	Category/ Type 002
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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>B. Peter Harrison</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2014
Mailing Address 10006 NE 36th Ct		Amount of Each Disbursement this Period 19.49 <b>Transaction ID : SB17.6302</b>
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement Reimburse printer supplies	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

Full Name (Last, First, Middle Initial) <b>c. Peter Harrison</b>		Date of Disbursement MM / DD / YYYY 09 / 08 / 2014
Mailing Address 10006 NE 36th Ct		Amount of Each Disbursement this Period 28.43 <b>Transaction ID : SB17.6864</b>
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement Office supplies	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	181.46
<b>TOTAL</b> 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 50 OF 76	
	<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) <b>A. Peter Harrison</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 10006 NE 36th Ct		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.6930</b>
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement In-kind - research/consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Hodas Middle Eastern</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 3401 SE Belmont St		Amount of Each Disbursement this Period 31.00 <b>Transaction ID : SB17.6457</b>
City Portland	State OR	
Zip Code 97214	Purpose of Disbursement Bob In-kind Pre-Primary - radio mtg	Category/ Type 002
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>c. Home Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 8601 NE Andresen Rd		Amount of Each Disbursement this Period 21.29 <b>Transaction ID : SB17.6887</b>
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Sign materials	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1521.29
<b>TOTAL</b> 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 51 OF 76			
	<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) <b>A. Suzanne Kendall</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 3808 SE 142nd Ct		Amount of Each Disbursement this Period 995.67 <b>Transaction ID : SB17.6932</b>
City Vancouver	State WA	
Purpose of Disbursement In-kind - food, banner, stickers		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Suzanne Kendall</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 3808 SE 142nd Ct		Amount of Each Disbursement this Period 133.50 <b>Transaction ID : SB17.6933</b> <b>[MEMO ITEM]</b>
City Vancouver	State WA	
Purpose of Disbursement Kendal In-kind - food for fundraiser		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. KGW - Gannett Marketing</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 1501 SW Jefferson St		Amount of Each Disbursement this Period 8000.00 <b>Transaction ID : SB17.6862</b>
City Portland	State OR	
Purpose of Disbursement Media purchase		Category/ Type 004
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8995.67
<b>TOTAL</b> 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 52 OF 76			
	<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) <b>A. Little Green Light</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2014
Mailing Address 4616 25th Ave NE #206		Amount of Each Disbursement this Period 39.00 <b>Transaction ID : SB17.6153</b>
City Seattle	State WA	
Zip Code 98105	Purpose of Disbursement Database software	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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>B. Little Green Light</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2014
Mailing Address 4616 25th Ave NE #206		Amount of Each Disbursement this Period 39.00 <b>Transaction ID : SB17.6303</b>
City Seattle	State WA	
Zip Code 98105	Purpose of Disbursement Internet database	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

Full Name (Last, First, Middle Initial) <b>c. Little Green Light</b>		Date of Disbursement MM / DD / YYYY 09 / 21 / 2014
Mailing Address 4616 25th Ave NE #206		Amount of Each Disbursement this Period 39.00 <b>Transaction ID : SB17.6902</b>
City Seattle	State WA	
Zip Code 98105	Purpose of Disbursement Online software	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	117.00
<b>TOTAL</b> 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 53 OF 76		
	<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) <b>A. MailChimp</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 512 Means St, Ste 404		Amount of Each Disbursement this Period 75.00
City Atlanta State GA Zip Code 30318	Purpose of Disbursement Email blast software	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		Transaction ID : SB17.6308
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Marsha Manning</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 3801 NE 172nd Ave		Amount of Each Disbursement this Period 400.00
City Vancouver State WA Zip Code 98682	Purpose of Disbursement In-kind - accounting work	
Candidate Name		Transaction ID : SB17.6134
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Marsha Manning</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 3801 NE 172nd Ave		Amount of Each Disbursement this Period 100.00
City Vancouver State WA Zip Code 98682	Purpose of Disbursement In-kind - Acct Aug partial	
Candidate Name		Transaction ID : SB17.6477
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	575.00
<b>TOTAL</b> 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 54 OF 76		
	<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) <b>A. Marsha Manning</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2014
Mailing Address 3801 NE 172nd Ave		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.6476</b>
City Vancouver	State WA	
Zip Code 98682	Purpose of Disbursement In-kind - Acct - Aug final	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Marsha Manning</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2014
Mailing Address 3801 NE 172nd Ave		Amount of Each Disbursement this Period 272.11 <b>Transaction ID : SB17.6890</b>
City Vancouver	State WA	
Zip Code 98682	Purpose of Disbursement Reimburse expenses	Category/ Type
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: WA District: 03	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Marsha Manning</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 3801 NE 172nd Ave		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.6926</b>
City Vancouver	State WA	
Zip Code 98682	Purpose of Disbursement In-kind - Accounting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1172.11
<b>TOTAL</b> 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 55 OF 76			
	<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) <b>A. Maria's Properties</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 10013 Hwy 99		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : SB17.6135</b>
City Vancouver	State WA	
Purpose of Disbursement In-kind - Rent for main office		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Maria's Properties</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 10013 Hwy 99		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : SB17.6471</b>
City Vancouver	State WA	
Purpose of Disbursement In-kind - Vanc office partial Aug		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. Maria's Properties</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2014
Mailing Address 10013 Hwy 99		Amount of Each Disbursement this Period 450.00 <b>Transaction ID : SB17.6470</b>
City Vancouver	State WA	
Purpose of Disbursement In-kind - Vanc rent - Aug partial		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1200.00
<b>TOTAL</b> 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 56 OF 76	
	<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) <b>A. Maria's Properties</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 10013 Hwy 99		Amount of Each Disbursement this Period 600.00
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement In-kind - Office rent - Vancouver	Transaction ID : SB17.6927
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Markon!</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 12209-A NE Fourth Plain Rd		Amount of Each Disbursement this Period 4909.44
City Vancouver	State WA	
Zip Code 98682	Purpose of Disbursement Signs	Transaction ID : SB17.6869
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Category/Type 006	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) <b>c. McDonalds - Chehalis</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2014
Mailing Address 1400 NW Louisiana Ave		Amount of Each Disbursement this Period 3.66
City Chehalis	State WA	
Zip Code 98532	Purpose of Disbursement Bob In-kind Pre-Primary - travel food	Transaction ID : SB17.6454 <b>[MEMO ITEM]</b>
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5509.44
<b>TOTAL</b> 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 57 OF 76	
	<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) <b>A. Mike McCarthy &amp; Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2014
Mailing Address 209 N 38th Place		Amount of Each Disbursement this Period 375.00 <b>Transaction ID : SB17.6888</b>
City Ridgefield	State WA	
Zip Code 98642	Purpose of Disbursement Radio ad production	Category/ Type 004
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 56.89 <b>Transaction ID : SB17.6140</b>
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Misc office supplies	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 12.34 <b>Transaction ID : SB17.6147</b>
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Misc for event	Category/ Type 003
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	444.23
<b>TOTAL</b> 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 58 OF 76	
	<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) <b>A. Office Depot</b>		Date of Disbursement MM / DD / YYYY 07 / 30 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 9999.99 58.49 <b>Transaction ID : SB17.6152</b>
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Paper & clipboards Category/Type 001	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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>B. Office Depot</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 9999.99 34.67 <b>Transaction ID : SB17.6278</b>
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Misc office supplies Category/Type 001	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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>c. Office Depot</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 9999.99 34.45 <b>Transaction ID : SB17.6465</b> <b>[MEMO ITEM]</b>
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Nick In-kind - drinks for volunteers Category/Type 001	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	93.16
<b>TOTAL</b> 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 59 OF 76	
	<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) <b>A. Office Depot</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 34.67 <b>Transaction ID : SB17.6282</b>
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Misc office supplies	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement MM / DD / YYYY 08 / 13 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 34.67 <b>Transaction ID : SB17.6287</b>
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Ink	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 98.00 <b>Transaction ID : SB17.6288</b>
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Stamps	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	167.34
<b>TOTAL</b> 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 60 OF 76			
	<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) <b>A. Office Depot</b>		Date of Disbursement
Mailing Address 8812 NE 5th Ave		M M / D D / Y Y Y Y 09 / 02 / 2014
City	State	Zip Code
Vancouver	WA	98665
Purpose of Disbursement Misc office supplies	001	Amount of Each Disbursement this Period 56.13
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Category/ Type	Transaction ID : SB17.6847
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement
Mailing Address 8812 NE 5th Ave		M M / D D / Y Y Y Y 09 / 11 / 2014
City	State	Zip Code
Vancouver	WA	98665
Purpose of Disbursement Printer	001	Amount of Each Disbursement this Period 212.03
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Category/ Type	Transaction ID : SB17.6875
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement
Mailing Address 8812 NE 5th Ave		M M / D D / Y Y Y Y 09 / 11 / 2014
City	State	Zip Code
Vancouver	WA	98665
Purpose of Disbursement Printer ink	001	Amount of Each Disbursement this Period 34.67
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Category/ Type	Transaction ID : SB17.6876
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	302.83
<b>TOTAL</b> 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 61 OF 76			
	<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) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 61.77
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Paper & ink	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		Transaction ID : SB17.6904
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 196.73
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Misc supplies - Manning reimbursed	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		Transaction ID : SB17.6892
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03	Category/Type 001	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 17.33
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Paper	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		Transaction ID : SB17.6893
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	79.10
<b>TOTAL</b> 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 62 OF 76	
	<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) <b>A. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 161.08 <b>Transaction ID : SB17.6896</b>
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement labels & postage	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

Full Name (Last, First, Middle Initial) <b>B. Ali Parvas</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 2440 W Lynnwood Dr		Amount of Each Disbursement this Period 900.00 <b>Transaction ID : SB17.6462</b>
City Longview	State WA	
Zip Code 98632	Purpose of Disbursement In-kind - Office Longview	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Ali Parvas</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 2440 W Lynnwood Dr		Amount of Each Disbursement this Period 550.00 <b>Transaction ID : SB17.6473</b>
City Longview	State WA	
Zip Code 98632	Purpose of Disbursement In-kind - Longview rent - partial Aug	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1611.08
<b>TOTAL</b> 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 63 OF 76	
	<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) <b>A. Ali Parvas</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2014
Mailing Address 2440 W Lynnwood Dr		Amount of Each Disbursement this Period 350.00 <b>Transaction ID : SB17.6472</b>
City Longview	State WA	
Zip Code 98632	Purpose of Disbursement In-kind - Longview rent - final Aug	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ali Parvas</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2014
Mailing Address 2440 W Lynnwood Dr		Amount of Each Disbursement this Period 900.00 <b>Transaction ID : SB17.6928</b>
City Longview	State WA	
Zip Code 98632	Purpose of Disbursement In-kind - Longview office rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. PayTrace</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 12409 E Mirabeau Parkway Suite 300		Amount of Each Disbursement this Period 26.65 <b>Transaction ID : SB17.6279</b>
City Spokane Valley	State WA	
Zip Code 99216	Purpose of Disbursement July CC Processor fee	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1276.65
<b>TOTAL</b> 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 64 OF 76	
	<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) <b>A. PayTrace</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 12409 E Mirabeau Parkway Suite 300		Amount of Each Disbursement this Period 27.00
City Spokane Valley State WA Zip Code 99216	Purpose of Disbursement CC Processing fees 003 Category/Type	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		<b>Transaction ID : SB17.6899</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Pioneer Street Cafe</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 201 N Pioneer		Amount of Each Disbursement this Period 27.00
City Ridgefield State WA Zip Code 98642	Purpose of Disbursement Bob In-kind Pre-Primary - lunch mtg 003 Category/Type	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		<b>Transaction ID : SB17.6449</b> <b>[MEMO ITEM]</b>
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>c. Powell Phones</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 607 NW 22nd Ave		Amount of Each Disbursement this Period 599.20
City Portland State OR Zip Code 97210	Purpose of Disbursement Robo calls 004 Category/Type	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		<b>Transaction ID : SB17.6286</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	626.20
<b>TOTAL</b> 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 65 OF 76	
	<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) <b>A. Red Lion Hotel Olympia</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014
Mailing Address 2300 Evergreen Park Dr SW		Amount of Each Disbursement this Period 216.00
City Olympia State WA Zip Code 98502	Purpose of Disbursement Bob In-kind Pre-Primary - travel food	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		Transaction ID : SB17.6455 <b>[MEMO ITEM]</b>
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>B. Safeway</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2014
Mailing Address 13023 NE Hwy 99		Amount of Each Disbursement this Period 5.00
City Vancouver State WA Zip Code 98686	Purpose of Disbursement Bob In-kind Pre-Primary - office mtg	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		Transaction ID : SB17.6458 <b>[MEMO ITEM]</b>
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 001		

Full Name (Last, First, Middle Initial) <b>c. Shur-Way Building Center</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 7124 NE St Johns Rd		Amount of Each Disbursement this Period 216.71
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Sign materials	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		Transaction ID : SB17.6886
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 001		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	216.71
<b>TOTAL</b> 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 66 OF 76			
	<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) <b>A. Signs &amp; T-Shirt Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 10501 NE Hwy 99 #49		Amount of Each Disbursement this Period 162.50 <b>Transaction ID : SB17.6137</b>
City Vancouver State WA Zip Code 98686	Purpose of Disbursement T-Shirts 006 Category/Type	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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>B. Signs &amp; T-Shirt Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 10501 NE Hwy 99 #49		Amount of Each Disbursement this Period 130.08 <b>Transaction ID : SB17.6151</b>
City Vancouver State WA Zip Code 98686	Purpose of Disbursement T-Shirts 006 Category/Type	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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>c. Signs &amp; T-Shirt Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 10501 NE Hwy 99 #49		Amount of Each Disbursement this Period 260.15 <b>Transaction ID : SB17.6295</b>
City Vancouver State WA Zip Code 98686	Purpose of Disbursement T-shirts 006 Category/Type	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	552.73
<b>TOTAL</b> 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 67 OF 76	
	<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) <b>A. Signs &amp; T-Shirt Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 10501 NE Hwy 99 #49		Amount of Each Disbursement this Period 236.31 <b>Transaction ID : SB17.6874</b>
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement T-shirts	Category/ Type 006
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

Full Name (Last, First, Middle Initial) <b>B. Starbucks - Centralia</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2014
Mailing Address 1161 Harrison Ave		Amount of Each Disbursement this Period 10.69 <b>Transaction ID : SB17.6453</b> <b>[MEMO ITEM]</b>
City Centralia	State WA	
Zip Code 98531	Purpose of Disbursement Bob In-kind Pre-Primary - travel food	Category/ Type 002
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	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>c. Target</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address 9000 NE Hwy 99		Amount of Each Disbursement this Period 330.80 <b>Transaction ID : SB17.6878</b>
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Camera	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	567.11
<b>TOTAL</b> 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 68 OF 76	
	<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**

**A. The Barge**

Full Name (Last, First, Middle Initial)  
Mailing Address 160 Laurel

City Raymond State WA Zip Code 98507

Purpose of Disbursement  
Bernard In-kind - breakfast fundraiser

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 26 / 2014

Amount of Each Disbursement this Period: 100.00

Transaction ID : SB17.6911

[MEMO ITEM]

Category/Type: 003

**B. The Couve Group**

Full Name (Last, First, Middle Initial)  
Mailing Address 601 Main St, Ste 209

City Vancouver State WA Zip Code 98660

Purpose of Disbursement  
Staff

Candidate Name  
**BOB DINGETHAL FOR CONGRESS**

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify)

State: WA District: 03

Date of Disbursement: 07 / 23 / 2014

Amount of Each Disbursement this Period: 2783.20

Transaction ID : SB17.6141

Category/Type: 001

**c. The Couve Group**

Full Name (Last, First, Middle Initial)  
Mailing Address 601 Main St, Ste 209

City Vancouver State WA Zip Code 98660

Purpose of Disbursement  
Staff

Candidate Name  
**BOB DINGETHAL FOR CONGRESS**

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify)

State: WA District: 03

Date of Disbursement: 08 / 04 / 2014

Amount of Each Disbursement this Period: 2500.00

Transaction ID : SB17.6285

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... 5283.20

**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 69 OF 76			
	<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) <b>A. The Couve Group</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address 601 Main St, Ste 209		Amount of Each Disbursement this Period 2551.52 <b>Transaction ID : SB17.6305</b>
City Vancouver State WA Zip Code 98660	Purpose of Disbursement Staff payroll 001 Category/Type	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) <b>B. The Couve Group</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 601 Main St, Ste 209		Amount of Each Disbursement this Period 2607.25 <b>Transaction ID : SB17.6867</b>
City Vancouver State WA Zip Code 98660	Purpose of Disbursement Staff payroll 001 Category/Type	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) <b>c. The Couve Group</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2014
Mailing Address 601 Main St, Ste 209		Amount of Each Disbursement this Period 2599.18 <b>Transaction ID : SB17.6885</b>
City Vancouver State WA Zip Code 98660	Purpose of Disbursement Staff payroll 001 Category/Type	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: WA District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7757.95
<b>TOTAL</b> 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 70 OF 76	
	<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) <b>A. The Gloo Factory</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 238 E 26th St		Amount of Each Disbursement this Period 700.00
City Tuscon	State AZ	
Zip Code 87501	Purpose of Disbursement Kendal In-kind - window stickers	Transaction ID : <b>SB17.6935</b>  [MEMO ITEM]
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Category/Type 004	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) <b>B. Total Merchant Concepts, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 12300 NE Fourth Plain Blvd		Amount of Each Disbursement this Period 135.03
City Vancouver	State WA	
Zip Code 98682	Purpose of Disbursement CC Fees	Transaction ID : <b>SB17.6281</b>
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Category/Type 001	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

Full Name (Last, First, Middle Initial) <b>c. Total Merchant Concepts, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 12300 NE Fourth Plain Blvd		Amount of Each Disbursement this Period 86.15
City Vancouver	State WA	
Zip Code 98682	Purpose of Disbursement CC Processing fees	Transaction ID : <b>SB17.6852</b>
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Category/Type 003	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	221.18
<b>TOTAL</b> 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 71 OF 76	
	<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) <b>A. UFCW 555</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address PO Box 23555		Amount of Each Disbursement this Period 712.50
City Tigard	State OR	
Zip Code 97281		
Purpose of Disbursement Printing		Category/ Type 006
Candidate Name		
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 1211 Daniels St		Amount of Each Disbursement this Period 37.30
City Vancouver	State WA	
Zip Code 98666		
Purpose of Disbursement Bulk Mail		Category/ Type 003
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		
Office Sought:	Disbursement For: 2014	
<input checked="" type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: WA	District: 03	

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 1211 Daniels St		Amount of Each Disbursement this Period 75.38
City Vancouver	State WA	
Zip Code 98666		
Purpose of Disbursement Postage - Manning reimbursed		Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		
Office Sought:	Disbursement For: 2014	
<input checked="" type="checkbox"/> House	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)	
<input type="checkbox"/> President		
State: WA	District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	749.80
<b>TOTAL</b> 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 72 OF 76	
	<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) <b>A. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 1211 Daniels St		Amount of Each Disbursement this Period 114.09 <b>Transaction ID : SB17.6895</b>
City Vancouver	State WA	
Zip Code 98666	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

Full Name (Last, First, Middle Initial) <b>B. WA State Democratic Party</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address PO Box 4027		Amount of Each Disbursement this Period 2092.04 <b>Transaction ID : SB17.6910</b>
City Seattle	State WA	
Zip Code 98194	Purpose of Disbursement In-kind - Voter file database	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. WA State Democratic Party</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2014
Mailing Address PO Box 4027		Amount of Each Disbursement this Period 15.00 <b>Transaction ID : SB17.6880</b>
City Seattle	State WA	
Zip Code 98194	Purpose of Disbursement Training fee	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WA District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2221.13
<b>TOTAL</b> 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 73 OF 76	
	<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) <b>A. Winco</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2014
Mailing Address 9700 NE Hwy 99		Amount of Each Disbursement this Period 64.49
City Vancouver	State WA	
Purpose of Disbursement Food for event	Category/ Type 003	<b>Transaction ID : SB17.6146</b>
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03		

Full Name (Last, First, Middle Initial) <b>B. Winco</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 9700 NE Hwy 99		Amount of Each Disbursement this Period 37.50
City Vancouver	State WA	
Purpose of Disbursement Food supplies for office	Category/ Type 001	<b>Transaction ID : SB17.6846</b>
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03		

Full Name (Last, First, Middle Initial) <b>C. Winco</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2014
Mailing Address 9700 NE Hwy 99		Amount of Each Disbursement this Period 29.40
City Vancouver	State WA	
Purpose of Disbursement Candy for parade	Category/ Type 007	<b>Transaction ID : SB17.6877</b>
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	131.39
<b>TOTAL</b> This Period (last page this line number only).....	49336.01

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

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

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>BOB E DINGETHAL</b>	<b>[PERSONAL FUNDS]</b>	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 <sup>M</sup> / 14 <sup>D</sup> / 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: <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"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	<input type="text" value="175.95"/>
<b>TOTALS</b> 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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4130

**BOB DINGETHAL FOR CONGRESS**

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

**[PERSONAL FUNDS]**

Election: 2014

**BOB E DINGETHAL**

Primary

General

Other (specify) ▼

Mailing Address

17811 NW 56TH AVE

City

State

ZIP Code

RIDGEFIELD

WA

98642

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

### TERMS

Date Incurred

M 12 / D 02 / Y 2013

Date Due

M / D / Y 11/1/2014

Interest Rate

0.00 % (apr)

Secured:

Yes  No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

2000.00

**TOTALS** This Period (last page in this line only)..... ▶

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

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

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

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

City	State	ZIP Code
RIDGEFIELD	WA	98642

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

**TERMS**

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

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	200.00
<b>TOTALS</b> This Period (last page in this line only).....	2375.95
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	