



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**VIGOR PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="27205.62"/>	<input type="text" value="27205.62"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="27205.62"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="8599.81"/>	<input type="text" value="8599.81"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="35805.43"/>	<input type="text" value="35805.43"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="12594.56"/>	<input type="text" value="12594.56"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="23210.87"/>	<input type="text" value="23210.87"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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

Write or Type Committee Name

**VIGOR PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2638.40	2638.40
(ii) Unitemized .....	5961.41	5961.41
(iii) TOTAL (add Lines 11(a)(i) and (ii)..... ▶	8599.81	8599.81
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	8599.81	8599.81
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	8599.81	8599.81
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	8599.81	8599.81

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	294.56	294.56
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	294.56	294.56
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12300.00	12300.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	12594.56	12594.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12594.56	12594.56

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	8599.81	8599.81
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8599.81	8599.81
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	294.56	294.56
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	294.56	294.56

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**VIGOR PAC**

**A. Lindsay Docherty**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17007 SE 5Th St  
 City Vancouver State WA Zip Code 98684  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Vigor Industrial Occupation: Quality Manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **230.75**

Date of Receipt: **02 / 28 / 2014**  
**Transaction ID : SA11AI.4934**  
 Amount of Each Receipt this Period: **46.15**

**B. Lindsay Docherty**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17007 SE 5Th St  
 City Vancouver State WA Zip Code 98684  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Vigor Industrial Occupation: Quality Manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **276.90**

Date of Receipt: **03 / 14 / 2014**  
**Transaction ID : SA11AI.4935**  
 Amount of Each Receipt this Period: **46.15**

**C. Lindsay Docherty**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17007 SE 5Th St  
 City Vancouver State WA Zip Code 98684  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Vigor Industrial Occupation: Quality Manager  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **323.05**

Date of Receipt: **03 / 28 / 2014**  
**Transaction ID : SA11AI.4936**  
 Amount of Each Receipt this Period: **46.15**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>138.45</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 24  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**VIGOR PAC**

Full Name (Last, First, Middle Initial)  
**A. Francis Doyle**

Mailing Address 5231 SE Bentwood Lane

City Port Orchard	State WA	Zip Code 98366
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FEC ID number of contributing federal political committee. **C**

Name of Employer Vigor Shipyards	Occupation Deputy Project Manager
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2014  
**Transaction ID : SA11AI.5041**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. Francis Doyle**

Mailing Address 5231 SE Bentwood Lane

City Port Orchard	State WA	Zip Code 98366
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FEC ID number of contributing federal political committee. **C**

Name of Employer Vigor Shipyards	Occupation Deputy Project Manager
-------------------------------------	--------------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : SA11AI.5042**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. Francis Doyle**

Mailing Address 5231 SE Bentwood Lane

City Port Orchard	State WA	Zip Code 98366
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FEC ID number of contributing federal political committee. **C**

Name of Employer Vigor Shipyards	Occupation Deputy Project Manager
-------------------------------------	--------------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : SA11AI.5043**

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 24  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**VIGOR PAC**

Full Name (Last, First, Middle Initial)  
**A. Brian Evert**

Mailing Address 15526 Interlake Avenue North

City Shoreline	State WA	Zip Code 98133
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FEC ID number of contributing federal political committee. **C**

Name of Employer US Fab	Occupation Dir. Project Management
----------------------------	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

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

**Transaction ID : SA11AI.4882**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 15526 Interlake Avenue North

City Shoreline	State WA	Zip Code 98133
-------------------	-------------	-------------------

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

Name of Employer US Fab	Occupation Dir. Project Management
----------------------------	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 14 / 2014**

**Transaction ID : SA11AI.4883**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 15526 Interlake Avenue North

City Shoreline	State WA	Zip Code 98133
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FEC ID number of contributing federal political committee. **C**

Name of Employer US Fab	Occupation Dir. Project Management
----------------------------	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

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

**Transaction ID : SA11AI.4884**

Amount of Each Receipt this Period  
**100.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**VIGOR PAC**

Full Name (Last, First, Middle Initial)  
**A. Brian Evert**

Mailing Address 15526 Interlake Avenue North

City Shoreline State WA Zip Code 98133

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

Name of Employer US Fab Occupation Dir. Project Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

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

**Transaction ID : SA11AI.4885**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 15526 Interlake Avenue North

City Shoreline State WA Zip Code 98133

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

Name of Employer US Fab Occupation Dir. Project Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

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

**Transaction ID : SA11AI.4886**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**C. Susan Haley**

Mailing Address 5310 SW Bancroft St

City Portland State OR Zip Code 97221

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

Name of Employer Vigor Industrial Occupation Sr VP, Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.75**

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

**Transaction ID : SA11AI.4948**

Amount of Each Receipt this Period  
**46.15**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **246.15**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**VIGOR PAC**

Full Name (Last, First, Middle Initial) <b>A. Susan Haley</b>		Date of Receipt
Mailing Address 5310 SW Bancroft St		<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City	State	Zip Code
Portland	OR	97221
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.4949</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="46.15"/>
Name of Employer	Occupation	
Vigor Industrial	Sr VP, Human Resources	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="276.90"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Susan Haley</b>		Date of Receipt
Mailing Address 5310 SW Bancroft St		<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Portland	OR	97221
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.4950</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="46.15"/>
Name of Employer	Occupation	
Vigor Industrial	Sr VP, Human Resources	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="323.05"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Kevin Hein</b>		Date of Receipt
Mailing Address 118 153rd PL SE		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City	State	Zip Code
Bellevue	WA	98007
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.4891</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
US Fab	Director of Engineering	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="142.30"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 11 OF 24  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**VIGOR PAC**

**A. Kevin Hein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 118 153rd PL SE  
 City Bellevue State WA Zip Code 98007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer US Fab Occupation Director of Engineering  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : SA11AI.4892**  
 Amount of Each Receipt this Period  
 50.00

**B. Kevin Hein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 118 153rd PL SE  
 City Bellevue State WA Zip Code 98007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer US Fab Occupation Director of Engineering  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : SA11AI.4893**  
 Amount of Each Receipt this Period  
 50.00

**C. Ramon Herndon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3628 SE 23rd St  
 City Gresham State OR Zip Code 97080  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vigor Marine Occupation Director of Crafts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 28 / 2014  
**Transaction ID : SA11AI.5010**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**VIGOR PAC**

Full Name (Last, First, Middle Initial) <b>A. Ramon Herndon</b>		Date of Receipt 03 / 14 / 2014 <b>Transaction ID : SA11AI.5011</b>
Mailing Address 3628 SE 23rd St		Amount of Each Receipt this Period 50.00
City Gresham	State OR	Zip Code 97080
FEC ID number of contributing federal political committee. C	Name of Employer Vigor Marine	Occupation Director of Crafts
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Ramon Herndon</b>		Date of Receipt 03 / 28 / 2014 <b>Transaction ID : SA11AI.5012</b>
Mailing Address 3628 SE 23rd St		Amount of Each Receipt this Period 50.00
City Gresham	State OR	Zip Code 97080
FEC ID number of contributing federal political committee. C	Name of Employer Vigor Marine	Occupation Director of Crafts
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. Edward Lynch</b>		Date of Receipt 02 / 28 / 2014 <b>Transaction ID : SA11AI.5093</b>
Mailing Address 26222-143rd Ave SE		Amount of Each Receipt this Period 50.00
City Kent	State WA	Zip Code 98042
FEC ID number of contributing federal political committee. C	Name of Employer Vigor Shipyards	Occupation Director, Crafts
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**VIGOR PAC**

Full Name (Last, First, Middle Initial)  
**A. Edward Lynch**

Mailing Address 26222-143rd Ave SE

City Kent	State WA	Zip Code 98042
--------------	-------------	-------------------

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

Name of Employer Vigor Shipyards	Occupation Director, Crafts
-------------------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

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

**Transaction ID : SA11AI.5094**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**B. Edward Lynch**

Mailing Address 26222-143rd Ave SE

City Kent	State WA	Zip Code 98042
--------------	-------------	-------------------

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

Name of Employer Vigor Shipyards	Occupation Director, Crafts
-------------------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

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

**Transaction ID : SA11AI.5095**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**c. John McQuillan**

Mailing Address 11520 SW Fairview Lane

City Tigard	State OR	Zip Code 97223
----------------	-------------	-------------------

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

Name of Employer Vigor Industrial	Occupation Director of Purchasing
--------------------------------------	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.75**

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

**Transaction ID : SA11AI.4963**

Amount of Each Receipt this Period  
**46.15**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>146.15</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 24
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**VIGOR PAC**

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

Mailing Address 11520 SW Fairview Lane

City Tigard State OR Zip Code 97223

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

Name of Employer: Vigor Industrial Occupation: Director of Purchasing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **276.90**

Date of Receipt: **03 / 14 / 2014**

Transaction ID : **SA11AI.4964**

Amount of Each Receipt this Period: **46.15**

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

Mailing Address 11520 SW Fairview Lane

City Tigard State OR Zip Code 97223

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

Name of Employer: Vigor Industrial Occupation: Director of Purchasing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **323.05**

Date of Receipt: **03 / 28 / 2014**

Transaction ID : **SA11AI.4965**

Amount of Each Receipt this Period: **46.15**

**C. Andrew Posewitz**  
Full Name (Last, First, Middle Initial)

Mailing Address 6026 38Th Ave SW

City Seattle State WA Zip Code 98126

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

Name of Employer: Vigor Industrial Occupation: Director of Safety

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **230.75**

Date of Receipt: **02 / 28 / 2014**

Transaction ID : **SA11AI.4970**

Amount of Each Receipt this Period: **46.15**

**SUBTOTAL** of Receipts This Page (optional)..... **138.45**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**VIGOR PAC**

Full Name (Last, First, Middle Initial)  
**A. Andrew Posewitz**

Mailing Address 6026 38Th Ave SW

City Seattle	State WA	Zip Code 98126
-----------------	-------------	-------------------

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

Name of Employer Vigor Industrial	Occupation Director of Safety
--------------------------------------	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
276.90

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2014

**Transaction ID : SA11AI.4971**

Amount of Each Receipt this Period  
46.15

Full Name (Last, First, Middle Initial)  
**B. Andrew Posewitz**

Mailing Address 6026 38Th Ave SW

City Seattle	State WA	Zip Code 98126
-----------------	-------------	-------------------

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

Name of Employer Vigor Industrial	Occupation Director of Safety
--------------------------------------	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
323.05

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2014

**Transaction ID : SA11AI.4972**

Amount of Each Receipt this Period  
46.15

Full Name (Last, First, Middle Initial)  
**C. Anthony Rabb**

Mailing Address 12614 SW IRON MOUNTAIN BLVD

City Portland	State OR	Zip Code 97219
------------------	-------------	-------------------

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

Name of Employer Vigor Industrial	Occupation CFO
--------------------------------------	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.76

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2014

**Transaction ID : SA11AI.4975**

Amount of Each Receipt this Period  
76.92

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	169.22
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 24
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**VIGOR PAC**

Full Name (Last, First, Middle Initial)  
**A. Anthony Rabb**

Mailing Address 12614 SW IRON MOUNTAIN BLVD

City Portland	State OR	Zip Code 97219
------------------	-------------	-------------------

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

Name of Employer Vigor Industrial	Occupation CFO
--------------------------------------	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
307.68

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 14 / 2014  
**Transaction ID : SA11AI.4976**

Amount of Each Receipt this Period  
76.92

Full Name (Last, First, Middle Initial)  
**B. Anthony Rabb**

Mailing Address 12614 SW IRON MOUNTAIN BLVD

City Portland	State OR	Zip Code 97219
------------------	-------------	-------------------

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

Name of Employer Vigor Industrial	Occupation CFO
--------------------------------------	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
384.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2014  
**Transaction ID : SA11AI.4977**

Amount of Each Receipt this Period  
76.92

Full Name (Last, First, Middle Initial)  
**C. Anthony Rabb**

Mailing Address 12614 SW IRON MOUNTAIN BLVD

City Portland	State OR	Zip Code 97219
------------------	-------------	-------------------

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

Name of Employer Vigor Industrial	Occupation CFO
--------------------------------------	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
461.52

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : SA11AI.4978**

Amount of Each Receipt this Period  
76.92

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	230.76
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 17 OF 24  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**VIGOR PAC**

Full Name (Last, First, Middle Initial)  
**A. Anthony Rabb**

Mailing Address 12614 SW IRON MOUNTAIN BLVD

City State Zip Code  
Portland OR 97219

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

Name of Employer Occupation  
Vigor Industrial CFO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
538.44

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : SA11AI.4979**

Amount of Each Receipt this Period  
76.92

Full Name (Last, First, Middle Initial)  
**B. Gregory Rainbolt**

Mailing Address 1878 NE 171st

City State Zip Code  
Shoreline WA 98155

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

Name of Employer Occupation  
Vigor Shipyards Director of Operations, East Sound

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2014  
**Transaction ID : SA11AI.5107**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. Gregory Rainbolt**

Mailing Address 1878 NE 171st

City State Zip Code  
Shoreline WA 98155

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

Name of Employer Occupation  
Vigor Shipyards Director of Operations, East Sound

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : SA11AI.5108**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 176.92

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

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

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

FOR LINE NUMBER: PAGE 18 OF 24  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**VIGOR PAC**

**A. Gregory Rainbolt**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1878 NE 171st  
City Shoreline State WA Zip Code 98155  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Vigor Shipyards Occupation: Director of Operations, East Sound  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **350.00**  
Date of Receipt: 03 / 28 / 2014  
Transaction ID : SA11AI.5109  
Amount of Each Receipt this Period: 50.00

**B. Michael Schwartz**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1401 Cedar Ridge Ct  
City Port Orchard State WA Zip Code 98366  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Vigor Shipyards Occupation: SSD Program Manager  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **250.00**  
Date of Receipt: 02 / 28 / 2014  
Transaction ID : SA11AI.5123  
Amount of Each Receipt this Period: 50.00

**C. Michael Schwartz**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1401 Cedar Ridge Ct  
City Port Orchard State WA Zip Code 98366  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Vigor Shipyards Occupation: SSD Program Manager  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **300.00**  
Date of Receipt: 03 / 14 / 2014  
Transaction ID : SA11AI.5124  
Amount of Each Receipt this Period: 50.00

**SUBTOTAL** of Receipts This Page (optional)..... **150.00**  
**TOTAL** This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 19 OF 24  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**VIGOR PAC**

Full Name (Last, First, Middle Initial)  
**A. Michael Schwartz**

Mailing Address 1401 Cedar Ridge Ct

City State Zip Code  
Port Orchard WA 98366

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

Name of Employer Occupation  
Vigor Shipyards SSD Program Manager

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2014  
**Transaction ID : SA11AI.5125**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. Renee Tiffany-Gentle**

Mailing Address 5438 E Blaisdell Ln

City State Zip Code  
Port Orchard WA 98366

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

Name of Employer Occupation  
Vigor Shipyards Asst Business Mgr

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2014  
**Transaction ID : SA11AI.5137**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. Renee Tiffany-Gentle**

Mailing Address 5438 E Blaisdell Ln

City State Zip Code  
Port Orchard WA 98366

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

Name of Employer Occupation  
Vigor Shipyards Asst Business Mgr

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2014  
**Transaction ID : SA11AI.5138**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 OF 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**VIGOR PAC**

Full Name (Last, First, Middle Initial) <b>A. Renee Tiffany-Gentle</b>		Date of Receipt MM / DD / YYYY 03 / 28 / 2014 <b>Transaction ID : SA11AI.5139</b>
Mailing Address 5438 E Blaisdell Ln		Amount of Each Receipt this Period 50.00
City Port Orchard	State WA	Zip Code 98366
FEC ID number of contributing federal political committee. C		
Name of Employer Vigor Shipyards	Occupation Asst Business Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B. Paul Torrey</b>		Date of Receipt MM / DD / YYYY 02 / 28 / 2014 <b>Transaction ID : SA11AI.5144</b>
Mailing Address 5413 Kirkwood Place N		Amount of Each Receipt this Period 50.00
City Seattle	State WA	Zip Code 98103
FEC ID number of contributing federal political committee. C		
Name of Employer Vigor Shipyards	Occupation Director of Facilities	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Paul Torrey</b>		Date of Receipt MM / DD / YYYY 03 / 14 / 2014 <b>Transaction ID : SA11AI.5145</b>
Mailing Address 5413 Kirkwood Place N		Amount of Each Receipt this Period 50.00
City Seattle	State WA	Zip Code 98103
FEC ID number of contributing federal political committee. C		
Name of Employer Vigor Shipyards	Occupation Director of Facilities	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 21 OF 24  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**VIGOR PAC**

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

Mailing Address 5413 Kirkwood Place N

City State Zip Code  
Seattle WA 98103

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

Name of Employer Occupation  
Vigor Shipyards Director of Facilities

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

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

**Transaction ID : SA11AI.5146**

Amount of Each Receipt this Period  
50.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2638.40

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**VIGOR PAC**

Full Name (Last, First, Middle Initial)

**A. Vigor Industrial**

Mailing Address 5555 N Channel Ave

City Portland State OR Zip Code 97217

Purpose of Disbursement Reimbursement for cost of PAC member lunch

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 16 / 2014

**Transaction ID : SB21B.5160**

Amount of Each Disbursement this Period: 294.56

Category/Type: 001

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

Amount of Each Disbursement this Period:

Category/Type:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

Amount of Each Disbursement this Period:

Category/Type:

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	294.56
<b>TOTAL</b> This Period (last page this line number only).....▶	294.56

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**VIGOR PAC**

Full Name (Last, First, Middle Initial)

**A. LISA MURKOWSKI FOR US SENATE**

Mailing Address PO BOX 100847

City ANCHORAGE State AK Zip Code 99510

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: AK District: 00

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 21 / 2014

Transaction ID : SB23.5156

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

**B. PEOPLE FOR PATTY MURRAY**

Mailing Address PO BOX 3662

City SEATTLE State WA Zip Code 98124

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: WA District: 00

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 21 / 2014

Transaction ID : SB23.5154

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. PEOPLE FOR PATTY MURRAY**

Mailing Address PO BOX 3662

City SEATTLE State WA Zip Code 98124

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: WA District: 00

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 21 / 2014

Transaction ID : SB23.5155

Amount of Each Disbursement this Period

3700.00

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

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

11300.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**VIGOR PAC**

Full Name (Last, First, Middle Initial)

**A. WYDEN FOR SENATE**

Mailing Address 232 NE 9TH AVENUE

City PORTLAND State OR Zip Code 97232

Purpose of Disbursement

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OR District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 20 / 2014

Transaction ID : SB23.5158

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

1000.00

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

12300.00