



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**CMR Political Action Committee**

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="2012"/>	<input type="text" value="57035.2"/>	<input type="text" value="57035.2"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="57035.2"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="68215.18"/>	<input type="text" value="68215.18"/>
(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="125250.38"/>	<input type="text" value="125250.38"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="59974.3"/>	<input type="text" value="59974.3"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="65276.08"/>	<input type="text" value="65276.08"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	

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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**CMR Political Action Committee**

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).....	63000	63000
(ii) Unitemized .....	50	50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	63050	63050
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	5000	5000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	68050	68050
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received .....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	165.18	165.18
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5) .....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	68215.18	68215.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	68215.18	68215.18

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	22974.3	22974.3
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	22974.3	22974.3
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	37000	37000
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements .....	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	59974.3	59974.3
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	59974.3	59974.3

**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) .....	68050	68050
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	68050	68050
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	22974.3	22974.3
37. Offsets to Operating Expenditures (from Line 15, page 3).....	165.18	165.18
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	22809.12	22809.12

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 26
	(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

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)  
**CMR Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Wayne Perry**

Mailing Address PO Box 645

City State Zip Code  
Medina WA 98039-0645

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

Name of Employer Occupation  
Shotgun Creek Investments LLC CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 25 / 2012

**Transaction ID : SA11AI-113-435-c**

Amount of Each Receipt this Period  
5000

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

Mailing Address 330 NW Brandon Drive

City State Zip Code  
Pullman WA 99163-3674

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

Name of Employer Occupation  
Schweitzer Engineering Labs President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 26 / 2012

**Transaction ID : SA11AI-163-438-c**

Amount of Each Receipt this Period  
4000

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

Mailing Address 330 NW Brandon Drive

City State Zip Code  
Pullman WA 99163-3674

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 26 / 2012

**Transaction ID : SA11AI-164-439-c**

Amount of Each Receipt this Period  
4000

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 13000.00

**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 7 OF 26  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**CMR Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Karen Nelson**

Mailing Address 3482 Cottonwood Road

City State Zip Code  
 Walla Walla WA 99362-1854

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

Name of Employer Occupation  
 Homemaker Homemaker

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2012

**Transaction ID : SA11AI-224-408-c**

Amount of Each Receipt this Period  
 5000

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

Mailing Address 3482 Cottonwood Road

City State Zip Code  
 Walla Walla WA 99362-1854

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

Name of Employer Occupation  
 Nelson Irrigation Owner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2012

**Transaction ID : SA11AI-225-409-c**

Amount of Each Receipt this Period  
 5000

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

Mailing Address 2506 S Boxwood Lane

City State Zip Code  
 Spokane WA 99223-4938

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

Name of Employer Occupation  
 Retired Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : SA11AI-27-440-c**

Amount of Each Receipt this Period  
 5000

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15000.00

**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 8 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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)  
**CMR Political Action Committee**

**A. Wanda Cowles**  
Full Name (Last, First, Middle Initial)

Mailing Address 2506 S Boxwood Lane

City Spokane State WA Zip Code 99223-4938

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 26 / 2012

**Transaction ID : SA11AI-28-441-c**

Amount of Each Receipt this Period  
 5000

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

Mailing Address 35131 SE Center Street

City Snoqualmie State WA Zip Code 98065-9231

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

Name of Employer NCM Contracting Group, LP Occupation Chairman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2012

**Transaction ID : SA11AI-317-434-c**

Amount of Each Receipt this Period  
 5000

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

Mailing Address PO Box 645

City Medina State WA Zip Code 98039-0645

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 25 / 2012

**Transaction ID : SA11AI-320-436-c**

Amount of Each Receipt this Period  
 5000

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15000.00

**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 9 OF 26
	<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)  
**CMR Political Action Committee**

**A. Rufus Lumry**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 6847  
 City Bellevue State WA Zip Code 98008-0847  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Acorn Advisors, Inc. Occupation President  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 28 / 2012**  
**Transaction ID : SA11AI-35-415-c**  
 Amount of Each Receipt this Period  
**5000**

**B. Patricia Lumry**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 305 111th Avenue NE Suite B  
 City Bellevue State WA Zip Code 98004-5875  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 28 / 2012**  
**Transaction ID : SA11AI-36-414-c**  
 Amount of Each Receipt this Period  
**5000**

**C. George Rowley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1595 NW Gilman Boulevard Suite 1  
 City Issaquah State WA Zip Code 98027-5329  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Rowley Properties, Inc. Occupation Realtor  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2012**  
**Transaction ID : SA11AI-441-460-c**  
 Amount of Each Receipt this Period  
**5000**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>15000.00</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 11 OF 26  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**CMR Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Electrical Contractors Political Action Committee**

Mailing Address 3 Bethesda Metro Center  
Suite 1100

City State Zip Code  
Bethesda MD 20814-6302

FEC ID number of contributing federal political committee. **C** C00113811

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012

**Transaction ID : SA11C-443-462-c**

Amount of Each Receipt this Period  
5000

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

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

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

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).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

**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 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)  
**CMR Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Complete Campaigns**

Mailing Address 610 Gateway Center Way  
Suite K

City San Diego State CA Zip Code 92102-4548

Purpose of Disbursement  
Credit Card Merchant Fees

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 29 / 2012

Transaction ID : SB21B-125-429-e

Amount of Each Disbursement this Period

500

Full Name (Last, First, Middle Initial)

**B. Complete Campaigns**

Mailing Address 610 Gateway Center Way  
Suite K

City San Diego State CA Zip Code 92102-4548

Purpose of Disbursement  
Credit Card Merchant Fees

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 25 / 2012

Transaction ID : SB21B-125-437-e

Amount of Each Disbursement this Period

500

Full Name (Last, First, Middle Initial)

**C. Concentric Office, LLC**

Mailing Address 8136 Old Keene MI Road  
Suite A300

City Springfield State VA Zip Code 22152-1853

Purpose of Disbursement  
Compliance Services

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2012

Transaction ID : SB21B-37-410-e

Amount of Each Disbursement this Period

3827.67

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

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

4827.67

**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)  
**CMR Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. The Catalyst Group, LLC**

Mailing Address 600 Pennsylvania Avenue SE  
Suite 330

City Washington State DC Zip Code 20003-6300

Purpose of Disbursement  
Campaign Event Rental & Catering

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**007**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B-50-399-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. The Roanoke Conference**

Mailing Address 6947 Coal Creek Parkway SE  
# 139

City Newcastle State WA Zip Code 98059-3136

Purpose of Disbursement  
Sponsorship Breakfast

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**012**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B-410-407-e**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Jeremy Deutsch**

Mailing Address 701 I Street, SE  
Apt 830

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Bonus/Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**001**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B-339-400-e**

Amount of Each Disbursement this Period

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

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

**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)  
**CMR Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Dawn Sugasa**

Mailing Address 1029 W First Avenue #201

City Spokane State WA Zip Code 99201

Purpose of Disbursement  
Finance Consulting for Committee

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 03 / 2012

Transaction ID : SB21B-108-398-e

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

**B. Dawn Sugasa**

Mailing Address 1029 W First Avenue #201

City Spokane State WA Zip Code 99201

Purpose of Disbursement  
Finance Consulting for Committee

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2012

Transaction ID : SB21B-108-406-e

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

**C. Dawn Sugasa**

Mailing Address 1029 W First Avenue #201

City Spokane State WA Zip Code 99201

Purpose of Disbursement  
Finance Consulting for Committee

003

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2012

Transaction ID : SB21B-108-411-e

Amount of Each Disbursement this Period

1000

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

3000.00

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

# 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)  
**CMR Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Dawn Sugasa**

Date of Disbursement: MM / DD / YYYY  
03 / 30 / 2012

Mailing Address: 1029 W First Avenue #201

City: Spokane State: WA Zip Code: 99201

Purpose of Disbursement: Consulting Fundraising for Committee  
Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID : **SB21B-108-458-e**

Amount of Each Disbursement this Period: 1000

Category/Type: 003

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

Date of Disbursement: MM / DD / YYYY

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Disbursement: \_\_\_\_\_  
Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  
 Other (specify) ▼

Amount of Each Disbursement this Period: \_\_\_\_\_

Category/Type: \_\_\_\_\_

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

Date of Disbursement: MM / DD / YYYY

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Purpose of Disbursement: \_\_\_\_\_  
Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  
 Other (specify) ▼

Amount of Each Disbursement this Period: \_\_\_\_\_

Category/Type: \_\_\_\_\_

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1000.00

**TOTAL** This Period (last page this line number only)..... ▶ 22974.30

**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)  
**CMR Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Bartlett For Congress Committee**

Mailing Address PO Box 280

City Buckeystown State MD Zip Code 21717-0280

Purpose of Disbursement  
Committee Contribution

011

Candidate Name  
**Roscoe G. Rep. Bartlett**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MD District: 06

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2012

Transaction ID : **SB23-416-418-e**

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

**B. Bartlett For Congress Committee**

Mailing Address PO Box 280

City Buckeystown State MD Zip Code 21717-0280

Purpose of Disbursement  
Committee Contribution

011

Candidate Name  
**Roscoe G. Rep. Bartlett**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MD District: 06

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2012

Transaction ID : **SB23-416-442-e**

Amount of Each Disbursement this Period

1500

Full Name (Last, First, Middle Initial)

**C. Benishek For Congress, Inc.**

Mailing Address PO Box 2012

City Kingsford State MI Zip Code 49802-2012

Purpose of Disbursement  
Committee Contribution

011

Candidate Name  
**Daniel J Benishek**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MI District: 01

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2012

Transaction ID : **SB23-418-419-e**

Amount of Each Disbursement this Period

1000

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

3500.00

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

**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)  
**CMR Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Benishek For Congress, Inc.**

Mailing Address PO Box 2012

City Kingsford State MI Zip Code 49802-2012

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**Daniel J Benishek**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MI District: 01

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2012

**Transaction ID : SB23-418-443-e**

Amount of Each Disbursement this Period

1500

Full Name (Last, First, Middle Initial)

**B. Beth Anne Rankin For Congress**

Mailing Address PO Box 2160

City Magnolia State AR Zip Code 71754-7160

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**Beth Anne Rankin**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: AR District: 04

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2012

**Transaction ID : SB23-432-431-e**

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

**C. Bobby Schilling For Congress**

Mailing Address 367 Avenue Of The Cities  
Suite D

City East Moline State IL Zip Code 61244-4053

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**Robert Todd Schilling**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IL District: 17

Date of Disbursement

MM / DD / YYYY  
03 / 30 / 2012

**Transaction ID : SB23-273-457-e**

Amount of Each Disbursement this Period

1000

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

3500.00

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

**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)  
**CMR Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Brian Bilbray For Congress**

Mailing Address 970 Seacoast Drive  
# 7

City Imperial Beach State CA Zip Code 91932-2402

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**Brian P Bilbray**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 50

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2012

**Transaction ID : SB23-420-420-e**

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

**B. Brian Bilbray For Congress**

Mailing Address 970 Seacoast Drive  
# 7

City Imperial Beach State CA Zip Code 91932-2402

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**Brian P Bilbray**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 50

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 27 / 2012

**Transaction ID : SB23-420-444-e**

Amount of Each Disbursement this Period

1500

Full Name (Last, First, Middle Initial)

**C. Coffman For Congress 2012**

Mailing Address 9249 S Broadway  
# 200-501

City Highlands Ranch State CO Zip Code 80129-5690

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**Mike Coffman**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CO District: 06

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2012

**Transaction ID : SB23-402-421-e**

Amount of Each Disbursement this Period

1000

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

3500.00

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





**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)  
**CMR Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Friends Of Tim Johnson**

Mailing Address PO Box 17097

City Urbana State IL Zip Code 61803-7097

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**Timothy V Johnson**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 13

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2012

**Transaction ID : SB23-422-423-e**

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

**B. Friends Of Tim Johnson**

Mailing Address PO Box 17097

City Urbana State IL Zip Code 61803-7097

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**Timothy V Johnson**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 13

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 27 / 2012

**Transaction ID : SB23-422-447-e**

Amount of Each Disbursement this Period

1500

Full Name (Last, First, Middle Initial)

**C. Gardner For Congress 2012**

Mailing Address PO Box 2408

City Loveland State CO Zip Code 80539-2408

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**Cory Gardner**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CO District: 04

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 28 / 2012

**Transaction ID : SB23-438-453-e**

Amount of Each Disbursement this Period

1000

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

3500.00

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

**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)  
**CMR Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Gary Miller For Congress**

Mailing Address 721 Brea Canyon Road  
Suite 7

City Diamond Bar State CA Zip Code 91789-3039

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**Gary G Miller**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 42

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2012

**Transaction ID : SB23-426-425-e**

Amount of Each Disbursement this Period

1000
------

Full Name (Last, First, Middle Initial)

**B. Gary Miller For Congress**

Mailing Address 721 Brea Canyon Road  
Suite 7

City Diamond Bar State CA Zip Code 91789-3039

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**Gary G Miller**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 42

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		27		2012

**Transaction ID : SB23-426-449-e**

Amount of Each Disbursement this Period

1500
------

Full Name (Last, First, Middle Initial)

**C. Jaime For Congress**

Mailing Address PO Box 1614

City Ridgefield State WA Zip Code 98642-0020

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**Jaime Herrera Beutler**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: WA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2012

**Transaction ID : SB23-49-417-e**

Amount of Each Disbursement this Period

1000
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3500.00
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**TOTAL** This Period (last page this line number only)..... ▶

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**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)  
**CMR Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Koster For Congress - 2012**

Mailing Address PO Box 231

City State Zip Code  
Arlington WA 98223-0231

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**John M Koster**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: WA District: 01

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 07 / 2012

**Transaction ID : SB23-430-430-e**

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

**B. Lungren For Congress**

Mailing Address 9321 Silverbend Lane

City State Zip Code  
Elk Grove CA 95624-3985

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**Daniel E. Lungren**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 03

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 28 / 2012

**Transaction ID : SB23-424-424-e**

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

**C. Lungren For Congress**

Mailing Address 9321 Silverbend Lane

City State Zip Code  
Elk Grove CA 95624-3985

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**Daniel E. Lungren**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 03

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 27 / 2012

**Transaction ID : SB23-424-448-e**

Amount of Each Disbursement this Period

1500

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

3500.00

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



**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)  
**CMR Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Votetipton.Com**

Mailing Address PO Box 846

City Cortez State CO Zip Code 81321-0846

Purpose of Disbursement  
Committee Contribution

011

Candidate Name

**Scott R Tipton**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CO District: 03

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2012

**Transaction ID : SB23-265-450-e**

Amount of Each Disbursement this Period

1500

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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)..... ▶

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

1500.00

37000.00