

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

CLINT DIDIER FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 157

Check if different than previously reported. (ACC)

ELTOPIA

WA

99301

2. **FEC IDENTIFICATION NUMBER** ▼

C C00558502

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

WA

04

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 11 / 04 / 2014 in the State of WA

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

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

Election on / / in the State of

5. Covering Period

10 / 01 / 2014

through

10 / 15 / 2014

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 Ms CHARLOTTE BENJAMIN

Signature of Treasurer Ms CHARLOTTE BENJAMIN

[Electronically Filed]

Date

11 / 21 / 2014

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
CLINT DIDIER FOR CONGRESS

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

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 73395.89 | 466480.53 |
| (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))..... | 73395.89 | 466480.53 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 38319.89 | 354314.95 |
| (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))..... | 38319.89 | 354314.95 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 142165.58 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 30000.00 | |

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

CLINT DIDIER 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)..... | 63167.39 | 373154.39 |
| (ii) Unitemized..... | 10228.50 | 93326.14 |
| (iii) TOTAL of contributions from individuals ▶ | 73395.89 | 466480.53 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) The Candidate..... | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 73395.89 | 466480.53 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 30000.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 30000.00 |
| 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)..... ▶ | 73395.89 | 496480.53 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 38319.89 | 354314.95 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 0.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 38319.89 | 354314.95 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 107089.58 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 73395.89 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 180485.47 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 38319.89 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 142165.58 |

**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 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) A. Ms VELTA BENSON | | Date of Receipt M M / D D / Y Y Y Y 10 / 03 / 2014 | |
| Mailing Address 3246 72ND PL SE | | Transaction ID : SA11AI.8526 | |
| City MERCER ISLAND | State WA | Zip Code 98040 | Amount of Each Receipt this Period _____ 100.00 DONATION |
| 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. Mr. WILLIAM BOULDS | | Date of Receipt M M / D D / Y Y Y Y 10 / 05 / 2014 | |
| Mailing Address 24928 107TH AVE SE | | Transaction ID : SA11AI.8414 | |
| City KENT | State WA | Zip Code 98030 | Amount of Each Receipt this Period _____ 50.00 DONATION |
| FEC ID number of contributing federal political committee. | | C | |
| Name of Employer FRANKLIN CTY REPUB CENTRAL COM | Occupation CHAIRMAN | | |
| 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) C. Mr. WILLIAM BOULDS | | Date of Receipt M M / D D / Y Y Y Y 10 / 06 / 2014 | |
| Mailing Address 24928 107TH AVE SE | | Transaction ID : SA11AI.8493 | |
| City KENT | State WA | Zip Code 98030 | Amount of Each Receipt this Period _____ 126.00 In-kind - APPETIZERS FOR FUNDRAISER |
| FEC ID number of contributing federal political committee. | | C | |
| Name of Employer FRANKLIN CTY REPUB CENTRAL COM | Occupation CHAIRMAN | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date _____ 1067.39 | | |

| | |
|---|--------------|
| SUBTOTAL of Receipts This Page (optional)..... | _____ 276.00 |
| 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 6 OF 48 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. WILLIAM BOULDS

Mailing Address 24928 107TH AVE SE

City State Zip Code
KENT WA 98030

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

Name of Employer Occupation
FRANKLIN CTY REPUB CENTRAL COM CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
941.39

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.8494

Amount of Each Receipt this Period
351.86

In-kind - FOOTBALLS FOR FUNDRAISER

B. Full Name (Last, First, Middle Initial)
Mr. WILLIAM BOULDS

Mailing Address 24928 107TH AVE SE

City State Zip Code
KENT WA 98030

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

Name of Employer Occupation
FRANKLIN CTY REPUB CENTRAL COM CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
589.53

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.8495

Amount of Each Receipt this Period
10.81

In-kind - ZIP TIES FOR SIGN INSTALLS

C. Full Name (Last, First, Middle Initial)
Mr. WILLIAM BOULDS

Mailing Address 24928 107TH AVE SE

City State Zip Code
KENT WA 98030

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

Name of Employer Occupation
FRANKLIN CTY REPUB CENTRAL COM CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
578.72

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.8496

Amount of Each Receipt this Period
328.72

In-kind - MILEAGE USED TO INSTALL SIGNS

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

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

691.39

**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 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BUCK FOR COLORADO

Mailing Address **PO BOX 338018**

City **GREELEY** State **CO** Zip Code **80633**

FEC ID number of contributing federal political committee. **C C00461368**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 09 / 2014

Transaction ID : SA11AI.8761

Amount of Each Receipt this Period
 _____ **1000.00**

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. ERIC BUTTERWORTH

Mailing Address **822 S ANDERSON ST**

City **KENNEWICK** State **WA** Zip Code **99336**

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

Name of Employer Occupation
BUTTERWORTH LAW OFFICE PLLC **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 06 / 2014

Transaction ID : SA11AI.8330

Amount of Each Receipt this Period
 _____ **500.00**

DONATION

C. Full Name (Last, First, Middle Initial)
CALLAHAN DAIRY LLC

Mailing Address **PO BOX 205**

City **ROYAL CITY** State **WA** Zip Code **99357**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 11 / 2014

Transaction ID : SA11AI.8702

Amount of Each Receipt this Period
 _____ **300.00**

DONATION - REIMB 4TH QTR

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

TOTAL 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: PAGE 8 OF 48
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. J GUADALUPE CARDENAS

Mailing Address 2660 FRONTIER RD

City PASCO State WA Zip Code 99301

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

Name of Employer CARDENAS AG PRODUCTS & SVCES Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 08 / 2014

Transaction ID : SA11AI.8727

Amount of Each Receipt this Period
 _____ 250.00

DONATION

B. Full Name (Last, First, Middle Initial)
Ms NOELETTA CARDENAS

Mailing Address 2660 FRONTIER RD

City PASCO State WA Zip Code 99301

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
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 08 / 2014

Transaction ID : SA11AI.8729

Amount of Each Receipt this Period
 _____ 250.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. JUSTIN CARR

Mailing Address 1882 BRANTINGHAM RD

City RICHLAND State WA Zip Code 99352

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

Name of Employer TRI-CITIES FEVER Occupation CO-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
 10 / 06 / 2014

Transaction ID : SA11AI.8531

Amount of Each Receipt this Period
 _____ 2600.00

DONATION

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

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

_____ 3100.00

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms TERI CARR

Mailing Address 1882 BRANTINGHAM RD

City RICHLAND State WA Zip Code 99352

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

Name of Employer TRI-CITIES FEVER Occupation CO-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
 10 / 06 / 2014

Transaction ID : SA11AI.8533

Amount of Each Receipt this Period
2600.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. THOMAS CORNELL

Mailing Address 2616 N RD 96

City PASCO State WA Zip Code 99301

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
 10 / 09 / 2014

Transaction ID : SA11AI.8507

Amount of Each Receipt this Period
500.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms ERICA CORRALES

Mailing Address 7090 N WAHLUKE

City OTHELLO State WA Zip Code 99344

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

Name of Employer CORRALES AG Occupation CO-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
 10 / 08 / 2014

Transaction ID : SA11AI.8551

Amount of Each Receipt this Period
500.00

DONATION

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

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

3600.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) A. Mr. MICHAEL CORRALES | | Date of Receipt M M / D D / Y Y Y Y 10 / 08 / 2014 | |
| Mailing Address 7090 N WAHLUKE | | Transaction ID : SA11AI.8553 | |
| City OTHELLO | State WA | Zip Code 99344 | Amount of Each Receipt this Period _____ 500.00 DONATION |
| FEC ID number of contributing federal political committee. | | C | |
| Name of Employer CORRALES AG | Occupation CO-OWNER | | |
| 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. Mr. THOMAS COULSON | | Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2014 | |
| Mailing Address 31 BUEHLER LN | | Transaction ID : SA11AI.8628 | |
| City CONNELL | State WA | Zip Code 99326 | Amount of Each Receipt this Period _____ 1000.00 DONATION |
| FEC ID number of contributing federal political committee. | | C | |
| Name of Employer TOSHIBA | Occupation CONSTRUCTION | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date _____ 1000.00 | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) C. Ms ROBIN CRAVEN | | Date of Receipt M M / D D / Y Y Y Y 10 / 08 / 2014 | |
| Mailing Address 1636 SAGEWOOD ST | | Transaction ID : SA11AI.8388 | |
| City RICHLAND | State WA | Zip Code 99352 | Amount of Each Receipt this Period _____ 800.00 DONATION |
| FEC ID number of contributing federal political committee. | | C | |
| 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 _____ 800.00 | | |

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | _____ 2300.00 |
| 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: PAGE 11 OF 48
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms JANET S DEAN

Mailing Address **PO BOX 2347**

City **PASCO** State **WA** Zip Code **99302**

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
1300.00

Date of Receipt
10 / 06 / 2014

Transaction ID : SA11AI.8559

Amount of Each Receipt this Period
1300.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. RUSSELL J DEAN

Mailing Address **PO BOX 2347**

City **PASCO** State **WA** Zip Code **99302**

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
1300.00

Date of Receipt
10 / 06 / 2014

Transaction ID : SA11AI.8561

Amount of Each Receipt this Period
1300.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms SHARON DERUYTER

Mailing Address **2300 KRUSE RD**

City **PASCO** State **WA** Zip Code **99301**

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

Name of Employer **SELF-EMPLOYED** Occupation **DAIRY FARMER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
10 / 06 / 2014

Transaction ID : SA11AI.8540

Amount of Each Receipt this Period
1500.00

DONATION

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

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

4100.00

**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 12 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. URBAN DIDIER

Mailing Address 7017 CROMWELL WAY

City State Zip Code
SACRAMENTO CA 95822

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.8164

Amount of Each Receipt this Period

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. STEVE DILLEY

Mailing Address 7724 BYERS RD

City State Zip Code
PASCO WA 99301

FEC ID number of contributing federal political committee.

Name of Employer Occupation
HARMS PACIFIC TRANSPORT TRUCKING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.8599

Amount of Each Receipt this Period

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. BILL DRESS

Mailing Address 2751 MEADOW HILLS CT

City State Zip Code
RICHLAND WA 99352

FEC ID number of contributing federal political committee.

Name of Employer Occupation
PASCO RANCH & HOME, INC PRESIDENT & CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.8471

Amount of Each Receipt this Period

DONATION

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 13 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. JEFFREY DRESS

Mailing Address 133 MEADOW HILLS DR

City RICHLAND State WA Zip Code 99352

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

Name of Employer PASCO RANCH & HOME, INC Occupation CORPORATE SECRETARY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.8467

Amount of Each Receipt this Period
250.00

DONATION

B. Full Name (Last, First, Middle Initial)
Ms TAMI DRESS

Mailing Address 133 MEADOW HILLS DR

City RICHLAND State WA Zip Code 99352

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
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.8469

Amount of Each Receipt this Period
250.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. DEAN EFFLER

Mailing Address 2334 COOK RD

City YAKIMA State WA Zip Code 98908

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
 10 / 06 / 2014

Transaction ID : SA11AI.8572

Amount of Each Receipt this Period
250.00

DONATION

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

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

750.00

**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 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms MARTHA EFFLER

Mailing Address 2334 COOK RD

City YAKIMA State WA Zip Code 98908

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
 10 / 06 / 2014

Transaction ID : SA11AI.8574

Amount of Each Receipt this Period
250.00

DONATION

B. Full Name (Last, First, Middle Initial)
Ms CINDI EGBERT

Mailing Address 1156 S BROWN RD

City CONNELL State WA Zip Code 99326

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
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 04 / 2014

Transaction ID : SA11AI.8295

Amount of Each Receipt this Period
125.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms CINDI EGBERT

Mailing Address 1156 S BROWN RD

City CONNELL State WA Zip Code 99326

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
375.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 10 / 2014

Transaction ID : SA11AI.8520

Amount of Each Receipt this Period
125.00

DONATION

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) | PAGE 15 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) A. Mr. DAN EGBERT | | Date of Receipt M M / D D / Y Y Y Y 10 / 04 / 2014 | |
| Mailing Address 1156 S BROWN RD | | Transaction ID : SA11AI.8292 | |
| City CONNELL | State WA | Zip Code 99326 | Amount of Each Receipt this Period _____ 125.00 DONATION |
| FEC ID number of contributing federal political committee. | | _____ C _____ | |
| Name of Employer SELF EMPLOYED | Occupation FARMER | | |
| 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. Mr. DAN EGBERT | | Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2014 | |
| Mailing Address 1156 S BROWN RD | | Transaction ID : SA11AI.8521 | |
| City CONNELL | State WA | Zip Code 99326 | Amount of Each Receipt this Period _____ 125.00 DONATION |
| FEC ID number of contributing federal political committee. | | _____ C _____ | |
| Name of Employer SELF EMPLOYED | Occupation FARMER | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date _____ 375.00 _____ | | |

| | | | |
|---|---|--|---|
| Full Name (Last, First, Middle Initial) C. Ms JEANETTE EVANS | | Date of Receipt M M / D D / Y Y Y Y 10 / 01 / 2014 | |
| Mailing Address PO BOX 70 | | Transaction ID : SA11AI.8479 | |
| City COWICHE | State WA | Zip Code 98923 | Amount of Each Receipt this Period _____ 1900.00 DONATION |
| 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 _____ 1900.00 _____ | | |

| | |
|---|---------------------|
| SUBTOTAL of Receipts This Page (optional)..... | _____ 2150.00 _____ |
| 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 16 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

| | | | |
|---|---|--|---|
| Full Name (Last, First, Middle Initial) Mr. WILLIAM G EVANS | | Date of Receipt M M / D D / Y Y Y Y 10 / 01 / 2014 | |
| Mailing Address PO BOX 70 | | Transaction ID : SA11AI.8477 | |
| City COWICHE | State WA | Zip Code 98923 | Amount of Each Receipt this Period _____ 1900.00 DONATION |
| 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 _____ 1900.00 | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) Dr. DAVID FISCHER | | Date of Receipt M M / D D / Y Y Y Y 10 / 09 / 2014 | |
| Mailing Address 711 S AUBURN ST | | Transaction ID : SA11AI.8677 | |
| City KENNEWICK | State WA | Zip Code 99336 | Amount of Each Receipt this Period _____ 750.00 DONATION |
| FEC ID number of contributing federal political committee. | | C _____ | |
| Name of Employer BENTON FRANKLIN OTHOPEDIC | Occupation PHYSICIAN | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date _____ 750.00 | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) Ms KATHY FISCHER | | Date of Receipt M M / D D / Y Y Y Y 10 / 09 / 2014 | |
| Mailing Address 711 S AUBURN ST | | Transaction ID : SA11AI.8679 | |
| City KENNEWICK | State WA | Zip Code 99336 | Amount of Each Receipt this Period _____ 750.00 DONATION |
| FEC ID number of contributing federal political committee. | | C _____ | |
| 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 _____ 750.00 | | |

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | _____ 3400.00 |
| 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 17 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. DENIS FREDERICKSON

Mailing Address 1908 156TH ST NE

City ARLINGTON State WA Zip Code 98223

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 **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2014

Transaction ID : SA11AI.8140

Amount of Each Receipt this Period
50.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. DENIS FREDERICKSON

Mailing Address 1908 156TH ST NE

City ARLINGTON State WA Zip Code 98223

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 **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.8664

Amount of Each Receipt this Period
50.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms GLORIA GIBBONS

Mailing Address 2519 CORDOBA CT

City RICHLAND State WA Zip Code 99354

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
 10 / 07 / 2014

Transaction ID : SA11AI.8530

Amount of Each Receipt this Period
200.00

DONATION

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

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

300.00

**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 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GOH CONSERVATIVE PAC

Mailing Address PO BOX 8060

City: TYLER State: TX Zip Code: 75711

FEC ID number of contributing federal political committee: **C** C00528596

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 10 / 02 / 2014

Transaction ID : SA11AI.8395

Amount of Each Receipt this Period: 2500.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. EUGENE GOLDSMITH

Mailing Address 5840 CHURCH RD

City: FERNDALE State: WA Zip Code: 98248

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

Name of Employer: Occupation:
SELF EMPLOYED SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 10 / 15 / 2014

Transaction ID : SA11AI.8644

Amount of Each Receipt this Period: 100.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. JOHN GOULET

Mailing Address 5511 WRIGLEY DR

City: PASCO State: WA Zip Code: 99301

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

Name of Employer: Occupation:
URS CORP ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 350.00

Date of Receipt: 10 / 09 / 2014

Transaction ID : SA11AI.8392

Amount of Each Receipt this Period: 25.00

DONATION

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

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

2625.00

**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 19 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. BOYD GRANT

Mailing Address 1516 W MARINA DR

City MOSES LAKE State WA Zip Code 98837

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
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.8845

Amount of Each Receipt this Period
200.00

DONATION

B. Full Name (Last, First, Middle Initial)
Ms FRANCIS GRANT

Mailing Address 1516 W MARINA DR

City MOSES LAKE State WA Zip Code 98837

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
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.8846

Amount of Each Receipt this Period
200.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms SHARON HACKNEY

Mailing Address 1350 GAGE BLVD

City RICHLAND State WA Zip Code 99352

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
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 08 / 2014

Transaction ID : SA11AI.8391

Amount of Each Receipt this Period
100.00

DONATION

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: PAGE 20 OF 48
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms MARY HARRIS

Mailing Address 960 BLANTON RD

City State Zip Code
ELTOPIA WA 99330

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 03 / 2014

Transaction ID : SA11AI.8426

Amount of Each Receipt this Period
 250.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. TODD HARRIS

Mailing Address 960 BLANTON RD

City State Zip Code
ELTOPIA WA 99330

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
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 03 / 2014

Transaction ID : SA11AI.8425

Amount of Each Receipt this Period
 250.00

DONATION

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

Mailing Address 41 N BAART RD

City State Zip Code
MESA WA 99343

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 01 / 2014

Transaction ID : SA11AI.8490

Amount of Each Receipt this Period
 500.00

DONATION

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 21 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. DONALD HILL

Mailing Address 291 PARISH RD

City SELAH State WA Zip Code 98942

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 **325.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.8548

Amount of Each Receipt this Period
125.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. RICHARD HOFFMAN

Mailing Address 4065 W EAGLEROCK DR

City WENATCHEE State WA Zip Code 98801

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
 10 / 13 / 2014

Transaction ID : SA11AI.8617

Amount of Each Receipt this Period
500.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. KYLE HOMER

Mailing Address 85 NE TRACY LN

City HERMISTON State OR Zip Code 97838

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

Name of Employer US Military Occupation Soldier

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.8465

Amount of Each Receipt this Period
300.00

DONATION

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

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

925.00

**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 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. RADPHORD-LEON HOWARD

Mailing Address 6129 DEER ST

City WEST RICHLAND State WA Zip Code 99353

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
1200.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.8364

Amount of Each Receipt this Period
100.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. RADPHORD-LEON HOWARD

Mailing Address 6129 DEER ST

City WEST RICHLAND State WA Zip Code 99353

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
1300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.8365

Amount of Each Receipt this Period
100.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. TIM JACKSON

Mailing Address 3027 120TH PL SE

City EVERETT State WA Zip Code 98208

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

Name of Employer THE BOEING CO Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.8639

Amount of Each Receipt this Period
300.00

DONATION

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) | PAGE 23 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. PHILLIP JOHNSON

Mailing Address 4501 W WILLIAMS RD

City BENTON CITY State WA Zip Code 99320

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
 10 / 06 / 2014

Transaction ID : SA11AI.8341

Amount of Each Receipt this Period
250.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. R HENRY JOHNSON

Mailing Address 2202 W CLEARWATER AVE

City KENNEWICK State WA Zip Code 99336

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
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 07 / 2014

Transaction ID : SA11AI.8385

Amount of Each Receipt this Period
100.00

DONATION

C. Full Name (Last, First, Middle Initial)
J R SIMPLOT CO PAC

Mailing Address PO BOX 27

City BOISE State ID Zip Code 83707

FEC ID number of contributing federal political committee. **C** C00120873

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 08 / 2014

Transaction ID : SA11AI.8733

Amount of Each Receipt this Period
2500.00

DONATION

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 24 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms CAROL KNOPP

Mailing Address 46 RD M NE

City MOSES LAKE State WA Zip Code 98837

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
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 02 / 2014

Transaction ID : SA11AI.8546

Amount of Each Receipt this Period
250.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. GLEN KNOPP

Mailing Address 46 RD M NE

City MOSES LAKE State WA Zip Code 98837

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

Name of Employer INLAND TARP & COVER CO 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
 10 / 02 / 2014

Transaction ID : SA11AI.8547

Amount of Each Receipt this Period
250.00

DONATION

C. Full Name (Last, First, Middle Initial)
Dr. CHRISTOPHER KONTOGIANIS

Mailing Address 1603 S JURUPA ST

City KENNEWICK State WA Zip Code 99338

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

Name of Employer BENTON COUNTY ORTHOPEDICS Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.8692

Amount of Each Receipt this Period
800.00

DONATION

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

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

1300.00

**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 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) A. Ms KARIN KONTOGIANIS | | Date of Receipt M M / D D / Y Y Y Y 10 / 06 / 2014 | |
| Mailing Address 1603 S JURUPA ST | | Transaction ID : SA11AI.8693 | |
| City KENNEWICK | State WA | Zip Code 99338 | Amount of Each Receipt this Period _____ 800.00 DONATION |
| FEC ID number of contributing federal political committee. | | C _____ | |
| Name of Employer K2 RENTALS LLC | Occupation OWNER | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date _____ 1300.00 | | |

| | | | |
|---|---|--|---|
| Full Name (Last, First, Middle Initial) B. Ms VICKI LOGES | | Date of Receipt M M / D D / Y Y Y Y 10 / 01 / 2014 | |
| Mailing Address 811 N 50TH AVE | | Transaction ID : SA11AI.8401 | |
| City YAKIMA | State WA | Zip Code 98908 | Amount of Each Receipt this Period _____ 1900.00 DONATION |
| 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 _____ 1900.00 | | |

| | | | |
|---|---|--|---|
| Full Name (Last, First, Middle Initial) C. LOUDERMILK FOR CONGRESS | | Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014 | |
| Mailing Address PO BOX 447 | | Transaction ID : SA11AI.8884 | |
| City CASSVILLE | State GA | Zip Code 30123 | Amount of Each Receipt this Period _____ 1000.00 DONATION |
| FEC ID number of contributing federal political committee. | | C C00543892 | |
| Name of Employer | Occupation | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date _____ 1000.00 | | |

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | _____ 3700.00 |
| 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 26 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LOUIE GOHMERT FOR CONGRESS COMMITTEE

Mailing Address 3310 S BROADWAY, STE 100

City State Zip Code
TYLER TX 75701

FEC ID number of contributing federal political committee. **C** C00386532

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11AI.8399

Amount of Each Receipt this Period
2000.00

DONATION

B. Full Name (Last, First, Middle Initial)
LUMMIS FOR CONGRESS

Mailing Address PO BOX 52188

City State Zip Code
CASPER WY 82609

FEC ID number of contributing federal political committee. **C** C00443580

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 01 / 2014

Transaction ID : SA11AI.8476

Amount of Each Receipt this Period
500.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. BRUCE MADSEN

Mailing Address 267 VINCENT CT

City State Zip Code
CENTRAL POINT OR 97502

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

Name of Employer Occupation
SPORTS THERAPY ASSOCIATES INC SAFETY CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 02 / 2014

Transaction ID : SA11AI.8127

Amount of Each Receipt this Period
150.00

DONATION

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

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

2650.00

**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 27 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

A. MARKETPLACE IDEAS & CONSERVATIVE KNOWLEDGE PAC

Full Name (Last, First, Middle Initial)
Mailing Address 228 S WASHINGTON ST, STE 115

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00502591

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 15 / 2014

Transaction ID : SA11AI.8887

Amount of Each Receipt this Period
 1000.00

DONATION

B. Mr. TOM MCCABE

Full Name (Last, First, Middle Initial)
Mailing Address 1424 10TH AVE SW

City OLYMPIA State WA Zip Code 98502

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

Name of Employer Occupation
 FREEDOM FOUNDATION CEO

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
 10 / 04 / 2014

Transaction ID : SA11AI.8290

Amount of Each Receipt this Period
 500.00

DONATION

C. Mr. WILLIAM MCKAY

Full Name (Last, First, Middle Initial)
Mailing Address 3516 W 46TH AVE

City KENNEWICK State WA Zip Code 99337

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

Name of Employer Occupation
 27TH AVE SELF STORAGE OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2014

Transaction ID : SA11AI.8372

Amount of Each Receipt this Period
 150.00

DONATION

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 28 OF 48 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. EDWIN MOATS

Mailing Address 13906 228TH ST NE

City ARLINGTON State WA Zip Code 98223

FEC ID number of contributing federal political committee.

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.8424

Amount of Each Receipt this Period

DONATION

B. Full Name (Last, First, Middle Initial)
Ms DONNA MOSING

Mailing Address 308 SAWGRASS LN

City BROUSSARD State LA Zip Code 70518

FEC ID number of contributing federal political committee.

Name of Employer DOVE TRANSPORTATION Occupation DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.8747

Amount of Each Receipt this Period

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. GREG MOSING

Mailing Address 308 SAWGRASS LN

City BROUSSARD State LA Zip Code 70518

FEC ID number of contributing federal political committee.

Name of Employer DOVE TRANSPORTATION Occupation ONWER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.8745

Amount of Each Receipt this Period

DONATION

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 29 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) Mr. LYNN OLSEN II | | Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2014 | |
| Mailing Address 8501 COLUMBIA RIVER RD | | Transaction ID : SA11AI.8725 | |
| City PASCO State WA Zip Code 99301 | Amount of Each Receipt this Period 2600.00 | | |
| FEC ID number of contributing federal political committee. C | | DONATION | |
| Name of Employer OLSEN AG INC Occupation OWNER | Election Cycle-to-Date 2600.00 | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |

| | | | |
|---|---|--|--|
| Full Name (Last, First, Middle Initial) Mr. DONALD PARKS | | Date of Receipt M M / D D / Y Y Y Y 10 / 05 / 2014 | |
| Mailing Address 412 RD 37 | | Transaction ID : SA11AI.8473 | |
| City PASCO State WA Zip Code 99301 | Amount of Each Receipt this Period 50.00 | | |
| FEC ID number of contributing federal political committee. C | | DONATION | |
| Name of Employer NONE Occupation RETIRED | Election Cycle-to-Date 550.00 | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) Mr. STEPHEN REEVES | | Date of Receipt M M / D D / Y Y Y Y 10 / 01 / 2014 | |
| Mailing Address 6714 69TH PL NE | | Transaction ID : SA11AI.8142 | |
| City MARYSVILLE State WA Zip Code 98270 | Amount of Each Receipt this Period 250.00 | | |
| FEC ID number of contributing federal political committee. C | | DONATION | |
| Name of Employer NONE Occupation RETIRED | Election Cycle-to-Date 350.00 | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 2900.00 |
| 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 30 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms RELLA REIMANN

Mailing Address 111 MCCLENNY RD

City PASCO State WA Zip Code 99301

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

Name of Employer T & R FARMS, INC Occupation CO-OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.8475

Amount of Each Receipt this Period
500.00

DONATION

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

Mailing Address 111 MCCLENNY RD

City PASCO State WA Zip Code 99301

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

Name of Employer T & R FARMS, INC Occupation CO-OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 06 / 2014

Transaction ID : SA11AI.8474

Amount of Each Receipt this Period
500.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. SCOTT N ROBERTS

Mailing Address 35702 W ORCUTT RD

City BENTON CITY State WA Zip Code 99320

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

Name of Employer SPRING CREEK VINEYARDS LLC 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
 10 / 07 / 2014

Transaction ID : SA11AI.8690

Amount of Each Receipt this Period
500.00

DONATION

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 31 OF 48
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms MARILYN ROBERTSON

Mailing Address 4236 140TH AVE NE

City State Zip Code
BELLEVUE WA 98005

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
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 09 / 2014

Transaction ID : SA11AI.8752

Amount of Each Receipt this Period
 100.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. RICHARD SCHALICH

Mailing Address 900 KLAMATH RD

City State Zip Code
MESA WA 99343

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
 10 / 02 / 2014

Transaction ID : SA11AI.8455

Amount of Each Receipt this Period
 100.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. DAN SCHWINN

Mailing Address PO BOX 511028

City State Zip Code
MELBOURNE BEACH FL 32951

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

Name of Employer Occupation
AVIDYNE MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 09 / 2014

Transaction ID : SA11AI.8503

Amount of Each Receipt this Period
 2600.00

DONATION

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

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

2800.00

**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 32 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) A. Mr. DONALD SMITH | | Date of Receipt M M / D D / Y Y Y Y 10 / 02 / 2014 | |
| Mailing Address 502 N RD 47 | | Transaction ID : SA11AI.8125 | |
| City PASCO | State WA | Zip Code 99301 | Amount of Each Receipt this Period _____ 350.00 DONATION |
| FEC ID number of contributing federal political committee. | | _____ C _____ | |
| Name of Employer SELF EMPLOYED | Occupation FARMER | | |
| 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. Ms CORINNE SPENCE | | Date of Receipt M M / D D / Y Y Y Y 10 / 02 / 2014 | |
| Mailing Address 1508 EUREKA RD | | Transaction ID : SA11AI.8123 | |
| City ROSEVILLE | State CA | Zip Code 95661 | Amount of Each Receipt this Period _____ 2600.00 DONATION |
| 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 _____ 2600.00 _____ | | |

| | | | |
|---|---|--|---|
| Full Name (Last, First, Middle Initial) C. Mr. CHARLES STEINBERG | | Date of Receipt M M / D D / Y Y Y Y 10 / 06 / 2014 | |
| Mailing Address 323 N MILLER | | Transaction ID : SA11AI.8338 | |
| City WENATCHEE | State WA | Zip Code 98901 | Amount of Each Receipt this Period _____ 1000.00 DONATION |
| FEC ID number of contributing federal political committee. | | _____ C _____ | |
| Name of Employer STEINBERG LAW FIRM PS | Occupation ATTORNEY | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date _____ 1150.00 _____ | | |

| | |
|---|---------------------|
| SUBTOTAL of Receipts This Page (optional)..... | _____ 3950.00 _____ |
| 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 33 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) Mr. JOHN STONE | | Date of Receipt M M / D D / Y Y Y Y 10 / 03 / 2014 | |
| Mailing Address 1602 S FILLMORE ST | | Transaction ID : SA11AI.8298 | |
| City KENNEWICK | State WA | Zip Code 99338 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 | |
| Name of Employer FRED MEYER | Occupation CLERK | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 800.00 | | |
| DONATION | | | |

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) Mr. JOHN STONE | | Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2014 | |
| Mailing Address 1602 S FILLMORE ST | | Transaction ID : SA11AI.8580 | |
| City KENNEWICK | State WA | Zip Code 99338 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 | |
| Name of Employer FRED MEYER | Occupation CLERK | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 900.00 | | |
| DONATION | | | |

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) Ms BARBARA STORMS | | Date of Receipt M M / D D / Y Y Y Y 10 / 01 / 2014 | |
| Mailing Address 8614 BELL ST | | Transaction ID : SA11AI.8448 | |
| City PASCO | State WA | Zip Code 99301 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 | |
| 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 275.00 | | |
| DONATION | | | |

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 250.00 |
| 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 34 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. Mr. CECIL SWIFT | | Date of Receipt M M / D D / Y Y Y Y 10 / 06 / 2014 | |
| Mailing Address 6753 E TILSTRA RD | | Transaction ID : SA11AI.8332 | |
| City BENTON CITY | State WA | Zip Code 99320 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 | |
| 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 550.00 | | |
| | | DONATION | |

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. Mr. CECIL SWIFT | | Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014 | |
| Mailing Address 6753 E TILSTRA RD | | Transaction ID : SA11AI.8649 | |
| City BENTON CITY | State WA | Zip Code 99320 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 | |
| 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 650.00 | | |
| | | DONATION | |

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. TERRY BAILIE FARMS | | Date of Receipt M M / D D / Y Y Y Y 10 / 01 / 2014 | |
| Mailing Address 5861 GARFIELD RD | | Transaction ID : SA11AI.8482 | |
| City MESA | State WA | Zip Code 99343 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 | |
| Name of Employer | Occupation | | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 500.00 | | |
| | | DONATION | |

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 700.00 |
| 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: PAGE 35 OF 48
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. EUGENE TOMICH

Mailing Address 6001 S THORP HWY

City State Zip Code
ELLENSBURG WA 98926

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
2300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 03 2014

Transaction ID : SA11AI.8457

Amount of Each Receipt this Period
250.00

DONATION

B. Full Name (Last, First, Middle Initial)
Ms JODINE TOMICH

Mailing Address 6001 S THORP HWY

City State Zip Code
ELLENSBURG WA 98926

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 03 2014

Transaction ID : SA11AI.8456

Amount of Each Receipt this Period
250.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. ROB VALICOFF

Mailing Address 300 N FRONTAGE RD

City State Zip Code
WAPATO WA 98951

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

Name of Employer Occupation
VALICOFF FRUIT CO, INC ORCHARDIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 03 2014

Transaction ID : SA11AI.8152

Amount of Each Receipt this Period
2600.00

DONATION

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

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

3100.00

**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 36 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms JUDY VERBRUGGE

Mailing Address 4905 SCENIC DR

City YAKIMA State WA Zip Code 98908

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
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 03 / 2014

Transaction ID : SA11AI.8458

Amount of Each Receipt this Period
250.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. MARTIN VERBRUGGE

Mailing Address 4905 SCENIC DR

City YAKIMA State WA Zip Code 98908

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 03 / 2014

Transaction ID : SA11AI.8460

Amount of Each Receipt this Period
250.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms DOROTHY WALTON-LUGLAN

Mailing Address 601 LINCOLN CT

City PROSSER State WA Zip Code 99350

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
550.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 08 / 2014

Transaction ID : SA11AI.8378

Amount of Each Receipt this Period
250.00

DONATION

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

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

750.00

**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 37 OF 48 |
| | <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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. AL YENNEY

Mailing Address **BOX 936**

City **PASCO** State **WA** Zip Code **99301**

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
10 / 02 / 2014

Transaction ID : SA11Al.8169

Amount of Each Receipt this Period
100.00

DONATION

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).....

100.00

63167.39

**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 38 OF 48 | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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)
CLINT DIDIER FOR CONGRESS

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. ALLIED LAW FIRM PLLC | | Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014 |
| Mailing Address 6951 MLK JUNIOR WAY S STE 226 | | Amount of Each Disbursement this Period 186.67 Transaction ID : SB17.8588 |
| City SEATTLE State WA Zip Code 98118 | Purpose of Disbursement PUBLIC DISCLOSURE REQ | |
| 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. AMERICAN EXPRESS | | Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014 |
| Mailing Address 200 VESEY ST | | Amount of Each Disbursement this Period 7.95 Transaction ID : SB17.8114 |
| City NEW YORK State NY Zip Code 10285 | Purpose of Disbursement ONLINE FEES | |
| 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) C. AMERICAN EXPRESS | | Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2014 |
| Mailing Address 200 VESEY ST | | Amount of Each Disbursement this Period 160.54 Transaction ID : SB17.8302 |
| City NEW YORK State NY Zip Code 10285 | Purpose of Disbursement ONLINE FEES | |
| 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: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 355.16 |
| 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 39 OF 48 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. APPLEBEE'S NEIGHBORHOOD GRILL

Mailing Address 5305 N RD 68

City PASCO State WA Zip Code 99301

Purpose of Disbursement CONSUMABLES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 03 / 2014

Amount of Each Disbursement this Period: 71.59

Transaction ID : SB17.8279

Full Name (Last, First, Middle Initial)
B. APPLEBEE'S NEIGHBORHOOD GRILL

Mailing Address 5305 N RD 68

City PASCO State WA Zip Code 99301

Purpose of Disbursement CONSUMABLES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 06 / 2014

Amount of Each Disbursement this Period: 45.57

Transaction ID : SB17.8314

Full Name (Last, First, Middle Initial)
C. APPLEBEE'S NEIGHBORHOOD GRILL

Mailing Address 5305 N RD 68

City PASCO State WA Zip Code 99301

Purpose of Disbursement CONSUMABLES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 10 / 2014

Amount of Each Disbursement this Period: 78.94

Transaction ID : SB17.8517

SUBTOTAL of Disbursements This Page (optional) 196.10

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 40 OF 48 | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | |

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)
CLINT DIDIER FOR CONGRESS

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Mr. WILLIAM BOULDS | | Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014 |
| Mailing Address 24928 107TH AVE SE | | Amount of Each Disbursement this Period 328.72 |
| City KENT State WA Zip Code 98030 | Purpose of Disbursement In-kind - MILEAGE USED TO INSTALL SIGNS | |
| Candidate Name | | Transaction ID : SB17.8497 |
| 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: | Category/Type | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Mr. WILLIAM BOULDS | | Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014 |
| Mailing Address 24928 107TH AVE SE | | Amount of Each Disbursement this Period 10.81 |
| City KENT State WA Zip Code 98030 | Purpose of Disbursement In-kind - ZIP TIES FOR SIGN INSTALLS | |
| Candidate Name | | Transaction ID : SB17.8498 |
| 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: | Category/Type | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Mr. WILLIAM BOULDS | | Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014 |
| Mailing Address 24928 107TH AVE SE | | Amount of Each Disbursement this Period 351.86 |
| City KENT State WA Zip Code 98030 | Purpose of Disbursement In-kind - FOOTBALLS FOR FUNDRAISER | |
| Candidate Name | | Transaction ID : SB17.8499 |
| 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: | Category/Type | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 691.39 |
| 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 41 OF 48 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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)
CLINT DIDIER FOR CONGRESS

| | | |
|--|-------------------------|---|
| Full Name (Last, First, Middle Initial) A. CHEVRON RITZVILLE | | Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014 |
| Mailing Address 101 W GALBREATH WAY | | Amount of Each Disbursement this Period 85.67 |
| City RITZVILLE | State WA Zip Code 99169 | |
| Purpose of Disbursement FUEL | Candidate Name | Transaction ID : SB17.8592 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | Category/Type | |

| | | |
|--|-------------------------|---|
| Full Name (Last, First, Middle Initial) B. CHEVRON RITZVILLE | | Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014 |
| Mailing Address 101 W GALBREATH WAY | | Amount of Each Disbursement this Period 70.83 |
| City RITZVILLE | State WA Zip Code 99169 | |
| Purpose of Disbursement FUEL | Candidate Name | Transaction ID : SB17.8608 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | Category/Type | |

| | | |
|--|-------------------------|---|
| Full Name (Last, First, Middle Initial) C. CMDI | | Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014 |
| Mailing Address 1593 SPRING HILL RD STE 400 | | Amount of Each Disbursement this Period 151.08 |
| City TYSONS CORNER | State VA Zip Code 22182 | |
| Purpose of Disbursement MAIL & INVOICES | Candidate Name | Transaction ID : SB17.8145 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | Category/Type | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 307.08 |
| 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 42 OF 48 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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)
CLINT DIDIER FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. CMDI | | Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014 |
| Mailing Address 1593 SPRING HILL RD STE 400 | | Amount of Each Disbursement this Period 573.87 |
| City TYSONS CORNER | State VA Zip Code 22182 | |
| Purpose of Disbursement MAIL & INVOICES | Category/Type | Transaction ID : SB17.8394 |
| 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. CONSTANT CONTACT | | Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014 |
| Mailing Address 1601 TRAPELO RD, RESERVOIR RD | | Amount of Each Disbursement this Period 8.00 |
| City WALTHAM | State MA Zip Code 02451 | |
| Purpose of Disbursement ONLINE MARKETING | Category/Type | Transaction ID : SB17.8518 |
| 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) C. CONSTANT CONTACT | | Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014 |
| Mailing Address 1601 TRAPELO RD, RESERVOIR RD | | Amount of Each Disbursement this Period 119.46 |
| City WALTHAM | State MA Zip Code 02451 | |
| Purpose of Disbursement ONLINE MARKETING | Category/Type | Transaction ID : SB17.8595 |
| 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: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 701.33 |
| 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 43 OF 48 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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)
CLINT DIDIER FOR CONGRESS

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Mr. DAVID FERMAN | | Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014 |
| Mailing Address 2104 E PHINNEY BAY DR | | Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.8359 |
| City BREMERTON | State WA | |
| Zip Code 98312 | Purpose of Disbursement SIGNAGE SEP & OCT | 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. HOLIDAY STATIONSTORE | | Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014 |
| Mailing Address 9792 N DIVISION | | Amount of Each Disbursement this Period 59.64 Transaction ID : SB17.8315 |
| City SPOKANE | State WA | |
| Zip Code 99218 | Purpose of Disbursement FUEL | 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) C. LOWE'S HOME IMPROVEMENT | | Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014 |
| Mailing Address 4520 ROAD 68 | | Amount of Each Disbursement this Period 72.06 Transaction ID : SB17.8768 |
| City PASCO | State WA | |
| Zip Code 99301 | Purpose of Disbursement SIGNAGE MATERIAL | 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) | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1131.70 |
| 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 44 OF 48 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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)
CLINT DIDIER FOR CONGRESS

| | | | | |
|---|--|-------------------|---|--|
| Full Name (Last, First, Middle Initial) A. MR QWIK'S COUNTRY, INC | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 | |
| Mailing Address PO BOX 8 | | | Amount of Each Disbursement this Period 67.19 | |
| City ELTOPIA | State WA | Zip Code 99330 | Transaction ID : SB17.8301 | |
| Purpose of Disbursement FUEL | | 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. MR QWIK'S COUNTRY, INC | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014 | |
| Mailing Address PO BOX 8 | | | Amount of Each Disbursement this Period 51.49 | |
| City ELTOPIA | State WA | Zip Code 99330 | Transaction ID : SB17.8590 | |
| Purpose of Disbursement FUEL | | 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) C. NATIONAL COLOR GRAPHICS INC | | | Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014 | |
| Mailing Address 25 W BOONE | | | Amount of Each Disbursement this Period 8849.26 | |
| City SPOKANE | State WA | Zip Code 99201 | Transaction ID : SB17.8393 | |
| Purpose of Disbursement FUNDRAISING MAILING | | 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: | | | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 8967.94 |
| 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 45 OF 48 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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)
CLINT DIDIER FOR CONGRESS

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. OTHELLO OUTLOOK | | Date of Disbursement M M / D D / Y Y Y Y 10 / 09 / 2014 |
| Mailing Address 125 S 1ST AVE | | Amount of Each Disbursement this Period 660.00 Transaction ID : SB17.8515 |
| City OTHELLO | State WA | |
| Zip Code 99344 | Purpose of Disbursement ADVERTISING | 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. RED LION HOTEL PASCO | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 |
| Mailing Address 2520 N 20TH AVE | | Amount of Each Disbursement this Period 320.37 Transaction ID : SB17.8277 |
| City PASCO | State WA | |
| Zip Code 99301 | Purpose of Disbursement ACCOMMODATIONS | 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) C. Mr. DOUGLAS SIMPSON | | Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014 |
| Mailing Address 6010 WYNN JONES RD E | | Amount of Each Disbursement this Period 19271.74 Transaction ID : SB17.8589 |
| City PORT ORCHARD | State WA | |
| Zip Code 98366 | Purpose of Disbursement CONSULTING/REIMB FOR RADIO/TWITTER/FACEBOOK | 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: | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 20252.11 |
| 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 46 OF 48 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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)
CLINT DIDIER FOR CONGRESS

| | | |
|---|-------------------------|---|
| Full Name (Last, First, Middle Initial) A. Mr. LARRY STICKNEY | | Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014 |
| Mailing Address 978 WESTOVER RD | | Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.8303 |
| City COLVILLE | State WA Zip Code 99114 | |
| Purpose of Disbursement PROFESSIONAL SVCES | Candidate Name | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | | |

| | | |
|---|-------------------------|--|
| Full Name (Last, First, Middle Initial) B. WALMART SUPERCENTER | | Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014 |
| Mailing Address 4820 N RD 68 | | Amount of Each Disbursement this Period 163.52 Transaction ID : SB17.8382 |
| City PASCO | State WA Zip Code 99301 | |
| Purpose of Disbursement OFFICE SUPPLIES | Candidate Name | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | | |

| | | |
|---|-------------------------|--|
| Full Name (Last, First, Middle Initial) C. WALMART SUPERCENTER | | Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014 |
| Mailing Address 4820 N RD 68 | | Amount of Each Disbursement this Period 120.46 Transaction ID : SB17.8769 |
| City PASCO | State WA Zip Code 99301 | |
| Purpose of Disbursement OFFICE SUPPLIES | Candidate Name | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5283.98 |
| TOTAL This Period (last page this line number only)..... | 37887.29 |

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/10.4244

CLINT DIDIER FOR CONGRESS

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

CLINT DIDIER FOR CONGRESS

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 157

City State ZIP Code
ELTOPIA WA 99301

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
10000.00 0.00 10000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
02 / 25 / 2014 M M / D D / Y Y Y Y 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 10000.00
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) **CLINT DIDIER FOR CONGRESS** Transaction ID : **SC/10.4245**

| | |
|--|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) CLINT DIDIER FOR CONGRESS | Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address PO BOX 157 | |

| | | |
|---------|-------|----------|
| City | State | ZIP Code |
| ELTOPIA | WA | 99301 |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 20000.00 | 0.00 | 20000.00 |

TERMS

| | | | |
|----------------|----------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| 03 / 31 / 2014 | / / 0 | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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

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

| | |
|--|----------|
| SUBTOTALS This Period This Page (optional)..... | 20000.00 |
| TOTALS This Period (last page in this line only)..... | 30000.00 |

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