

# 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  
Friends of Dave Reichert

ADDRESS (number and street) PO Box 2032  
 Check if different than previously reported. (ACC) Issaquah WA 98027

2. **FEC IDENTIFICATION NUMBER** ▼ C C00397737 CITY ▲ Issaquah STATE ▲ WA ZIP CODE ▲ STATE ▼ DISTRICT WA 08

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 M M / D D / Y Y Y Y in the State of  

(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2014 through M M / D D / Y Y Y Y 03 / 31 / 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 Kate Lind  
Signature of Treasurer Kate Lind [Electronically Filed] Date M M / D D / Y Y Y Y 04 / 15 / 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.

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Friends of Dave Reichert**

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))....	171548.45	709333.28
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	1350.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	171548.45	707983.28
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	104392.64	421078.09
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2394.65
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	104392.64	418683.44
8. Cash on Hand at Close of Reporting Period (from Line 27).....	421899.17	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**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

**Friends of Dave Reichert**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	81763.20	295502.76
(ii) Unitemized.....	16285.25	44039.63
(iii) TOTAL of contributions from individuals ▶	98048.45	339542.39
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	73500.00	369790.89
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	171548.45	709333.28
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	2394.65
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	171548.45	711727.93

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	104392.64	421078.09
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	350.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1350.00
21. OTHER DISBURSEMENTS .....	0.00	40525.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	104392.64	462953.09

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	354743.36
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	171548.45
25. SUBTOTAL (add Line 23 and Line 24).....	526291.81
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	104392.64
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	421899.17

**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 111
	<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)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**BRUCE BORAM**

Mailing Address 401 NE RAVENNA BLVD STE 151

City	State	Zip Code
SEATTLE	WA	98115-8443

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

Name of Employer	Occupation
CATALYST CONSULTING	CONSULTANT

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  
 03 / 31 / 2014

**Transaction ID : SA11.34904**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

CONTRIBUTION

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

Mailing Address 1910 FAIRVIEW AVENUE E SUITE 500

City	State	Zip Code
SEATTLE	WA	98102-3698

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

Name of Employer	Occupation
COL-PAC	EXECUTIVE

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  
 03 / 26 / 2014

**Transaction ID : SA11.34758**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

CONTRIBUTION

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

Mailing Address 24232 224TH AVE SE UNIT 9

City	State	Zip Code
MAPLE VALLEY	WA	98038-7955

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  
 \_\_\_\_\_ 1250.00

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

**Transaction ID : SA11.34446**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

CONTRIBUTION

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

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

\_\_\_\_\_ 2250.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**MIKE CARPINITO**

Mailing Address 23032 88TH AVE S

City State Zip Code  
KENT WA 98031-2402

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

Name of Employer Occupation  
CARPINITO BROTHERS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.34911**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

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

Mailing Address 20347 NE 61ST CT

City State Zip Code  
REDMOND WA 98053-7824

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.34895**

Amount of Each Receipt this Period  
 2000.00  
 CONTRIBUTION

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

Mailing Address 8300 AVALON DR

City State Zip Code  
MERCER ISLAND WA 98040-5615

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

Name of Employer Occupation  
CITY OF MERCER ISLAND COUNCIL MEMBER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
525.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2014

**Transaction ID : SA11.34398**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

4750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**CORY CHARLSTON**

Mailing Address 500 S 336TH ST STE 111

City State Zip Code  
FEDERAL WAY WA 98003-6389

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

Name of Employer Occupation  
SELF / WESTFALL-GOODEN SINGLE-FAMILY OIL, GAS, & MISC INVESTMENTS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 20 / 2014

**Transaction ID : SA11.34734**

Amount of Each Receipt this Period  
300.00  
CONTRIBUTION

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

Mailing Address 4556 177TH AVE SE

City State Zip Code  
BELLEVUE WA 98006-6519

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 17 / 2014

**Transaction ID : SA11.34425**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address 4556 177TH AVE SE

City State Zip Code  
BELLEVUE WA 98006-6519

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : SA11.34902**

Amount of Each Receipt this Period  
350.00  
CONTRIBUTION

**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: PAGE 8 OF 111  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**STEVE H. COHN**

Mailing Address **4556 177TH AVE SE**

City **BELLEVUE** State **WA** Zip Code **98006-6519**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11.34905**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**COLVILLE RESERVATION CONFEDERATED TRIBES**

Mailing Address **PO BOX 150**

City **NESPELEM** State **WA** Zip Code **99155-0150**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFC** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 24 / 2014**

**Transaction ID : SA11.34461**

Amount of Each Receipt this Period  
**2500.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM M. CONNER**

Mailing Address **846 108TH AVE NE**

City **BELLEVUE** State **WA** Zip Code **98004-4671**

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 **1255.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 20 / 2014**

**Transaction ID : SA11.34402**

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

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

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

**3750.00**



**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 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**DALE COWLES**

Mailing Address 3018 142ND PL NE

City State Zip Code  
BELLEVUE WA 98007-3252

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 04 / 2014

**Transaction ID : SA11.34431**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address 8580 GRAND AVENUE NE

City State Zip Code  
BAINBRIDGE ISLAND WA 98110-2949

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  
1100.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 27 / 2014

**Transaction ID : SA11.34411**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address 2000 FABEN DR

City State Zip Code  
MERCER ISLAND WA 98040-2002

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  
03 / 31 / 2014

**Transaction ID : SA11.34906**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

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

2250.00

**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 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**BARBARA DUZSIK**

Mailing Address 36939 198TH AVE SE

City AUBURN State WA Zip Code 98092-9571

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

Name of Employer LILE MOVING & STORAGE Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.34855**

Amount of Each Receipt this Period  
 300.00

CONTRIBUTION

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

Mailing Address 1853 BIRCH BAY LYNDEN RD

City FERNDALE State WA Zip Code 98248-9702

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

Name of Employer SELF Occupation FARM

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2014

**Transaction ID : SA11.34523**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

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

Mailing Address 10612 NE 46TH ST.

City KIRKLAND State WA Zip Code 98033-7611

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

Name of Employer UCONS LLC Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : SA11.34759**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

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

1400.00

**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 11 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS ECKHART**

Mailing Address 10612 NE 46TH ST.

City KIRKLAND State WA Zip Code 98033-7611

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

Name of Employer UCONS LLC Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : SA11.34759B**

Amount of Each Receipt this Period  
 -400.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

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

Mailing Address 10612 NE 46TH ST.

City KIRKLAND State WA Zip Code 98033-7611

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

Name of Employer UCONS LLC Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2014

**Transaction ID : SA11.34968**

Amount of Each Receipt this Period  
 400.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

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

Mailing Address 5829 21ST STREET N

City ARLINGTON State VA Zip Code 22205-3309

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

Name of Employer MONUMENT POLICY GROUP Occupation VP GOVERNMENT RELATIONS

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  
 03 / 11 / 2014

**Transaction ID : SA11.34475**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

**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 12 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**MR. FRED L. FLEISCHMANN**

Mailing Address 19927 SE 400TH ST

City State Zip Code  
ENUMCLAW WA 98022-8912

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

Name of Employer Occupation  
RETIRED 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  
**03 / 11 / 2014**

**Transaction ID : SA11.34526**

Amount of Each Receipt this Period  
**150.00**  
 CONTRIBUTION

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

Mailing Address 1752 S. FERNSIDE DR

City State Zip Code  
TACOMA WA 98465-1309

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

Name of Employer Occupation  
RETIRED 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  
**03 / 04 / 2014**

**Transaction ID : SA11.34563**

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

**C.** Full Name (Last, First, Middle Initial)  
**CLAUDE G.B. FONTHEIM**

Mailing Address 3054 DAVENPORT STREET NW

City State Zip Code  
WASHINGTON DC 20008-2115

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFF( INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**537.65**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 30 / 2014**

**Transaction ID : SA11.34637**

Amount of Each Receipt this Period  
**37.65**  
 CONTRIBUTION

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

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

**687.65**

**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 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**DONALD E. GAINES**

Mailing Address **4628 WAYNEWORTH ST W**

City **UNIVERSITY PLACE** State **WA** Zip Code **98466-1032**

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

Name of Employer **PUGET SOUND ENERGY** Occupation **VICE PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11.34907**

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

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

Mailing Address **12405 NE 36TH PLACE**

City **BELLEVUE** State **WA** Zip Code **98005-1328**

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 **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11.34858**

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

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

Mailing Address **12495 NE 36TH PL**

City **BELLEVUE** State **WA** Zip Code **98005-1328**

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

Name of Employer **AERGENLLC** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

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

**Transaction ID : SA11.34435**

Amount of Each Receipt this Period  
**1500.00**  
 CONTRIBUTION

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

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

**2500.00**

**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 111
	<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)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**TOM GURR**

Mailing Address 4414 230TH AVE SE

City SAMMAMISH State WA Zip Code 98075-5239

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

Name of Employer PRESIDENT Occupation NW COMM

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.34857**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address 12515 WILLOWS RD NE STE 200

City KIRKLAND State WA Zip Code 98034-8795

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

Name of Employer MONARCH ENTERPRISES Occupation CHAIRMAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : SA11.34428**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 12515 WILLOWS RD NE STE 200

City KIRKLAND State WA Zip Code 98034-8795

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

Name of Employer MONARCH ENTERPRISES Occupation CHAIRMAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 04 / 2014

**Transaction ID : SA11.34428B**

Amount of Each Receipt this Period  
 -600.00  
 CONTRIBUTION

**[MEMO ITEM]**  
 REDESIGNATION TO GENERAL

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**ELLING HALVORSON**

Mailing Address 12515 WILLOWS RD NE STE 200

City State Zip Code  
KIRKLAND WA 98034-8795

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

Name of Employer Occupation  
MONARCH ENTERPRISES CHAIRMAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 04 / 2014

**Transaction ID : SA11.34970**

Amount of Each Receipt this Period  
600.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION FROM PRIMARY**

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

Mailing Address 148 HEATHER LN

City State Zip Code  
WENATCHEE WA 98801-9644

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

Name of Employer Occupation  
SELF EMPLOYED FARMER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3400.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 27 / 2014

**Transaction ID : SA11.34975**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

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

Mailing Address 148 HEATHER LN

City State Zip Code  
WENATCHEE WA 98801-9644

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

Name of Employer Occupation  
SELF EMPLOYED FARMER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3400.00

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

**Transaction ID : SA11.34975B**

Amount of Each Receipt this Period  
-800.00

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 111
	<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)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL O. HAMBELTON**

Mailing Address **148 HEATHER LN**

City **WENATCHEE** State **WA** Zip Code **98801-9644**

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 **3400.00**

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

**Transaction ID : SA11.34977**

Amount of Each Receipt this Period  
**800.00**

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION FROM PRIMARY**

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

Mailing Address **148 HEATHER LN**

City **WENATCHEE** State **WA** Zip Code **98801-9644**

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 **3400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 27 / 2014**

**Transaction ID : SA11.34976**

Amount of Each Receipt this Period  
**4200.00**

CONTRIBUTION

**[MEMO ITEM]  
SEE REATTRIBUTION**

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

Mailing Address **148 HEATHER LANE**

City **WENATCHEE** State **WA** Zip Code **98801-9644**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

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

**Transaction ID : SA11.34978**

Amount of Each Receipt this Period  
**2600.00**

CONTRIBUTION

**[MEMO ITEM]  
REATTRIBUTION / REDESIGNATION REQUESTED  
(AUTOMATIC) REATTRIBUTION FROM SPOUSE**

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

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

**0.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. MICHAEL O. HAMBELTON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 14 / 2014
Mailing Address 148 HEATHER LN		<b>Transaction ID : SA11.34976B</b>
City WENATCHEE	State WA	Zip Code 98801-9644
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period -2600.00	
Name of Employer SELF EMPLOYED	Occupation FARMER	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3400.00	<b>[MEMO ITEM] REATTRIBUTION TO SPOUSE</b>

Full Name (Last, First, Middle Initial) <b>B. SCOTT C. HANNAH</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 25 / 2014
Mailing Address 2700 RICHARDS RD STE 101		<b>Transaction ID : SA11.34752</b>
City BELLEVUE	State WA	Zip Code 98005-4200
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer PACIFIC VALLEY FOODS	Occupation EXPORTER	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>C. PETER R. HARADER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 21 / 2014
Mailing Address 2100 S 260TH ST APT N101		<b>Transaction ID : SA11.34564</b>
City DES MOINES	State WA	Zip Code 98198-9075
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.00	
Name of Employer NONE	Occupation RETIRED	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	530.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 111
	<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)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**PETER R. HARADER**

Mailing Address 2100 S 260TH ST APT N101

City DES MOINES State WA Zip Code 98198-9075

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  
 03 / 31 / 2014

**Transaction ID : SA11.34892**

Amount of Each Receipt this Period  
 20.00

CONTRIBUTION

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

Mailing Address 96 CASCADE KY

City BELLEVUE State WA Zip Code 98006-1030

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

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

**Transaction ID : SA11.34473**

Amount of Each Receipt this Period  
 2600.00

CONTRIBUTION

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

Mailing Address 96 CASCADE KY

City BELLEVUE State WA Zip Code 98006-1030

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

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

**Transaction ID : SA11.34474**

Amount of Each Receipt this Period  
 2600.00

CONTRIBUTION

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

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

**5220.00**

**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 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**FRED HOLTON**

Mailing Address **PO BOX 2544**

City **BLAINE** State **WA** Zip Code **98231-2544**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **290.11**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 18 / 2014**

**Transaction ID : SA11.34745**

Amount of Each Receipt this Period  
**55.55**  
 CONTRIBUTION

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

Mailing Address **8865 OVERLAKE DR W**

City **MEDINA** State **WA** Zip Code **98039-5347**

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

Name of Employer **AMERICAN PILE DRIVING EQUIP.** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

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

**Transaction ID : SA11.34419**

Amount of Each Receipt this Period  
**2600.00**  
 CONTRIBUTION

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

Mailing Address **8865 OVERLAKE DR W**

City **MEDINA** State **WA** Zip Code **98039-5347**

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

Name of Employer **AMERICAN PILE DRIVING EQUIP.** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

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

**Transaction ID : SA11.34420**

Amount of Each Receipt this Period  
**2400.00**  
 CONTRIBUTION

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

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

**5055.55**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 111
	<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)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**MARY ELLEN HUGHES**

Mailing Address 8865 OVERLAKE DR W

City MEDINA State WA Zip Code 98039-5347

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  
5000.00

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

**Transaction ID : SA11.34416**

Amount of Each Receipt this Period  
 2600.00  
 CONTRIBUTION

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

Mailing Address 8865 OVERLAKE DR W

City MEDINA State WA Zip Code 98039-5347

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  
5000.00

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

**Transaction ID : SA11.34417**

Amount of Each Receipt this Period  
 2400.00  
 CONTRIBUTION

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

Mailing Address 8555 135TH AVE SE

City NEWCASTLE State WA Zip Code 98059-3318

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

Name of Employer JENSEN COMPANIES 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 Y Y  
 02 / 10 / 2014

**Transaction ID : SA11.34438**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

5500.00

**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 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**MARY KAYE KAYE JOHNSTON**

Mailing Address 21241 SE 40TH ST

City SAMMAMISH State WA Zip Code 98075-5238

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  
 03 / 12 / 2014

**Transaction ID : SA11.34622**

Amount of Each Receipt this Period  
 150.00  
 CONTRIBUTION

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

Mailing Address 6107 63RD STREET CT NW

City GIG HARBOR State WA Zip Code 98335-7392

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

Name of Employer RHODES & ASSOICATES Occupation CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 21 / 2014

**Transaction ID : SA11.34426**

Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

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

Mailing Address 6755 BEACH DR SW

City SEATTLE State WA Zip Code 98136-1760

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  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 11 / 2014

**Transaction ID : SA11.34449**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

1450.00

**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 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**EDWARD KIBBLE**

Mailing Address 6755 BEACH DR SW

City SEATTLE State WA Zip Code 98136-1760

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  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 11 / 2014

**Transaction ID : SA11.34449B**

Amount of Each Receipt this Period  
 -900.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

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

Mailing Address 6755 BEACH DR SW

City SEATTLE State WA Zip Code 98136-1760

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  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 11 / 2014

**Transaction ID : SA11.34972**

Amount of Each Receipt this Period  
 900.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

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

Mailing Address P.O. BOX 1136

City MONROE State WA Zip Code 98272-4136

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

Name of Employer SELF EMPLOYED Occupation BUSINESS CONTRACTOR

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  
 03 / 24 / 2014

**Transaction ID : SA11.34750**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

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

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

250.00

**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 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>MRS. KRISTI KNOTT</b>		Date of Receipt M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 3108 C STREET SE		<b>Transaction ID : SA11.34409</b>
City AUBURN	State WA	
Zip Code 98002-8826		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer SUNSET BUILDERS INC.	Occupation VICE PRESIDENT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1050.00	

Full Name (Last, First, Middle Initial) <b>MR. RICK E. KOCH</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 36 S HUDSON ST		<b>Transaction ID : SA11.34570</b>
City SEATTLE	State WA	
Zip Code 98134-2443		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer ALL CITY FENCE	Occupation OWNER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1850.00	

Full Name (Last, First, Middle Initial) <b>MIKE LEVY</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 4326 193RD AVE SE		<b>Transaction ID : SA11.34453</b>
City ISSAQUAH	State WA	
Zip Code 98027-9704		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer LOZIER HOMES	Occupation DIRECTOR	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**WALTER LIANG**

Mailing Address 4540 \*TH AVE NE #905

City SEATTLE State WA Zip Code 98105-

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 11 / 2014

**Transaction ID : SA11.34440**

Amount of Each Receipt this Period  
 300.00  
 CONTRIBUTION

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

Mailing Address P.O. BOX 5071

City KENT State WA Zip Code 98064-5071

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 21 / 2014

**Transaction ID : SA11.34766**

Amount of Each Receipt this Period  
 150.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LUMMI INDIAN BUSINESS COUNCIL**

Mailing Address 2616 KWINA RD

City BELLINGHAM State WA Zip Code 98226-9291

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

Name of Employer N/A Occupation N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 17 / 2014

**Transaction ID : SA11.34946**

Amount of Each Receipt this Period  
 595.00  
 CONTRIBUTION

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

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

1045.00



**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 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. PATRICIA LUMRY**

Mailing Address P.O. BOX 6847

City: BELLEVUE State: WA Zip Code: 98008-0847

FEC ID number of contributing federal political committee: C

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2850.00

Date of Receipt: 03 / 18 / 2014

**Transaction ID : SA11.34638**

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

Mailing Address P.O. BOX 6847

City: BELLEVUE State: WA Zip Code: 98008-0847

FEC ID number of contributing federal political committee: C

Name of Employer: SELF Occupation: SELF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2850.00

Date of Receipt: 03 / 18 / 2014

**Transaction ID : SA11.34639**

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. LOUIS M. LUNDQUIST**

Mailing Address 8621 NE 6TH ST

City: MEDINA State: WA Zip Code: 98039-5302

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: 1600.00

Date of Receipt: 02 / 10 / 2014

**Transaction ID : SA11.34444**

Amount of Each Receipt this Period: 1500.00

CONTRIBUTION

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT G. MAAS**

Mailing Address 7330 80TH PL SE

City: MERCER ISLAND State: WA Zip Code: 98040-5930

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

Name of Employer: SELF EMPLOYED Occupation: FINANCIAL ADVISOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 350.00

Date of Receipt: 02 / 10 / 2014

**Transaction ID : SA11.34442**

Amount of Each Receipt this Period: 350.00

CONTRIBUTION

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

Mailing Address 429 29TH ST NE STE A

City: PUYALLUP State: WA Zip Code: 98372-6767

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

Name of Employer: JOHN L. SCOTT Occupation: REALTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 01 / 27 / 2014

**Transaction ID : SA11.34410**

Amount of Each Receipt this Period: 1500.00

CONTRIBUTION

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

Mailing Address PO BOX 115

City: NEAH BAY State: WA Zip Code: 98357-0115

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

Name of Employer: N/A Occupation: N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 02 / 20 / 2014

**Transaction ID : SA11.34451**

Amount of Each Receipt this Period: 1500.00

CONTRIBUTION

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

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

3350.00

**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 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**JUDY MANARO**

Mailing Address 4028 41ST AVE SO

City SEATTLE State WA Zip Code 98118-1115

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11.34522**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address 8159 W MERCER WAY

City MERCER ISLAND State WA Zip Code 98040-5628

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

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.34908**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address 15508 130TH AVE CT E

City PUYALLUP State WA Zip Code 98374-9613

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  
850.00

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

**Transaction ID : SA11.34434**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**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 28 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL D. MCDEVITT**

Mailing Address 27801 187TH AVE SE

City State Zip Code  
KENT WA 98042-5459

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

Name of Employer Occupation  
HUSKY INT'L TRUCKS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 18 / 2014

**Transaction ID : SA11.34701**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address 10215 SE 224TH

City State Zip Code  
KENT WA 98031-3208

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : SA11.34436**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address 2717 200TH AVE SE

City State Zip Code  
SAMMAMISH WA 98075-7467

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

Name of Employer Occupation  
B.E. MEYERS & CO. INC. SELF-EMPLOYED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : SA11.34896**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**NANCY MEYERS**

Mailing Address 2717 200TH AVE SE

City SAMMAMISH State WA Zip Code 98075-7467

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

Name of Employer B.E. MEYERS & CO., INC. Occupation SELF-EMPLOYED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.34897**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

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

Mailing Address 8202 NE JUANITA DR

City KIRKLAND State WA Zip Code 98034-3529

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

Name of Employer NONE Occupation NONE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 20 / 2014

**Transaction ID : SA11.34400**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

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

Mailing Address 2229 166TH AVE E

City LAKE TAPPS State WA Zip Code 98391-4903

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

Name of Employer MOLEN ORTHODONTICS Occupation ORTHODONTIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 11 / 2014

**Transaction ID : SA11.34439**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**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 30 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**. MUCKLESHOOT INDIAN TRIBE**

Mailing Address 39015 172ND AVE SE

City AUBURN State WA Zip Code 98092-9763

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

Name of Employer N/A Occupation N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 21 / 2014

**Transaction ID : SA11.34460**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**L. T. MURRAY, JR.**

Mailing Address 1201 PACIFIC AVE #1750

City TACOMA State WA Zip Code 98402-4389

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 23 / 2014

**Transaction ID : SA11.34407**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 160 ROY ST

City SEATTLE State WA Zip Code 98109-4162

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

Name of Employer MEDIA PLUS Occupation ADVERTISING EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 22 / 2014

**Transaction ID : SA11.34427**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**HUGO E. OSWALD JR.**

Mailing Address 2430 76TH AVE SE APT 619

City State Zip Code  
MERCER ISLAND WA 98040-3363

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  
975.00

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

**Transaction ID : SA11.34396**

Amount of Each Receipt this Period  
125.00

CONTRIBUTION

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

Mailing Address 10415 226TH PL SW

City State Zip Code  
EDMONDS WA 98020-5124

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  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 20 / 2014

**Transaction ID : SA11.34401**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

Mailing Address 10415 226TH PL SW

City State Zip Code  
EDMONDS WA 98020-5124

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  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : SA11.34924**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

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

625.00

**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 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES PIGOTT**

Mailing Address **PO BOX 1518**

City **BELLEVUE** State **WA** Zip Code **98009-1518**

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 **1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 20 / 2014**

**Transaction ID : SA11.34399**

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

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

Mailing Address **244 40TH AVE E**

City **SEATTLE** State **WA** Zip Code **98112-5030**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 04 / 2014**

**Transaction ID : SA11.34430**

Amount of Each Receipt this Period  
**450.00**  
 CONTRIBUTION

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

Mailing Address **1214 AALIS, PO BOX 70**

City **TAHOLAH** State **WA** Zip Code **98587-0070**

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

Name of Employer **N/A** Occupation **N/A**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 18 / 2014**

**Transaction ID : SA11.34743**

Amount of Each Receipt this Period  
**2500.00**  
 CONTRIBUTION

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

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

**3950.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM REED, JR.**

Mailing Address 1402 3RD AVE STE 1318

City SEATTLE State WA Zip Code 98101-2116

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  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 23 / 2014

**Transaction ID : SA11.34406**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 5252 116TH PL SE

City BELLEVUE State WA Zip Code 98006-3320

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

Name of Employer PILGRIM LUTHERAN CHURCH Occupation PASTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
325.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.34909**

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

Mailing Address 1703 CASTLEROCK AVE

City WENATCHEE State WA Zip Code 98801-2538

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : SA11.34768**

Amount of Each Receipt this Period  
 150.00  
 CONTRIBUTION

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

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

1400.00

**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 34 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES F. RIGBY JR.**

Mailing Address 10301 45TH AVE NE

City State Zip Code  
SEATTLE WA 98125-8121

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

Name of Employer Occupation  
SELF EMPLOYED ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 20 / 2014

**Transaction ID : SA11.34403**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address 1650 171ST AVE NE

City State Zip Code  
BELLEVUE WA 98008-2915

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

Name of Employer Occupation  
RETIRED 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  
03 / 12 / 2014

**Transaction ID : SA11.34619**

Amount of Each Receipt this Period  
100.00  
CONTRIBUTION

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

Mailing Address 3208 CASCADIA AVE S

City State Zip Code  
SEATTLE WA 98144-7000

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

Name of Employer Occupation  
ALASKAN COPPER MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 04 / 2014

**Transaction ID : SA11.34433**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

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

2100.00

**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 35 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**CLARENCE W. SCHAWK**

Mailing Address 1021 PETERSON AVE APT 301

City State Zip Code  
PARK RIDGE IL 60068-5158

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

Name of Employer Occupation  
SCHAWK, INC. 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  
03 / 18 / 2014

**Transaction ID : SA11.34731**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address PO BOX 969, 8130 RAILROAD AVE STE

City State Zip Code  
SNOQUALMIE WA 98065-

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

Name of Employer Occupation  
N/A N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : SA11.34941**

Amount of Each Receipt this Period  
5000.00  
CONTRIBUTION

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

Mailing Address PO BOX 969, 8130 RAILROAD AVE STE

City State Zip Code  
SNOQUALMIE WA 98065-

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

Name of Employer Occupation  
N/A N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

**Transaction ID : SA11.34941B**

Amount of Each Receipt this Period  
-2400.00  
CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

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

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

5500.00

**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 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**SNOQUALMIE TRIBE**

Mailing Address **PO BOX 969, 8130 RAILROAD AVE STE**

City **SNOQUALMIE** State **WA** Zip Code **98065-**

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

Name of Employer **N/A** Occupation **N/A**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11.34962**

Amount of Each Receipt this Period  
**2400.00**

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION FROM PRIMARY**

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

Mailing Address **2130 COLUMBIA VIEW CIR #16**

City **WENATCHEE** State **WA** Zip Code **98801-8327**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 27 / 2014**

**Transaction ID : SA11.34797**

Amount of Each Receipt this Period  
**300.00**

CONTRIBUTION

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

Mailing Address **4600 FOREST AVE SE**

City **MERCER ISLAND** State **WA** Zip Code **98040-4307**

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 **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11.34910**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

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

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

**550.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID STILL**

Mailing Address 3119 N 33RD ST

City TACOMA State WA Zip Code 98407-6422

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

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

**Transaction ID : SA11.34422**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

Mailing Address 15745 UPLANS WAY SE

City NORTH BEND State WA Zip Code 98045-9506

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 13 / 2014

**Transaction ID : SA11.34627**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. MATHEW PATRICK THOMAS**

Mailing Address 107 NE 64TH ST

City SEATTLE State WA Zip Code 98115-6546

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

Name of Employer PACIFIC NW EQUIPMENT Occupation DIRECTOR OF SALES

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : SA11.34437**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

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

2250.00

**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 38 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**ROY A. THOMPSON**

Mailing Address 4208 N 27TH ST

City TACOMA State WA Zip Code 98407-5217

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 24 / 2014**

**Transaction ID : SA11.34791**

Amount of Each Receipt this Period  
**100.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. GEORGE C. TOSTEVIN**

Mailing Address 12555 37TH AVE NE

City SEATTLE State WA Zip Code 98125-4654

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 18 / 2014**

**Transaction ID : SA11.34651**

Amount of Each Receipt this Period  
**100.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**STILLAGUAMISH TRIBE OF INDIANS**

Mailing Address 3310 SMOKEY POINT DR

City ARLINGTON State WA Zip Code 98223-7719

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

Name of Employer N/A Occupation N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11.34945**

Amount of Each Receipt this Period  
**2600.00**  
 CONTRIBUTION

**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 39 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**STILLAGUAMISH TRIBE OF INDIANS**

Mailing Address 3310 SMOKEY POINT DR

City ARLINGTON State WA Zip Code 98223-7719

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

Name of Employer N/A Occupation N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11.34945B**

Amount of Each Receipt this Period  
**-1500.00**

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**STILLAGUAMISH TRIBE OF INDIANS**

Mailing Address 3310 SMOKEY POINT DR

City ARLINGTON State WA Zip Code 98223-7719

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

Name of Employer N/A Occupation N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4100.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11.34974**

Amount of Each Receipt this Period  
**1500.00**

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION FROM PRIMARY**

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

Mailing Address 330 289TH PL NE

City CARNATION State WA Zip Code 98014-9640

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

Name of Employer SELF EMPLOYED Occupation CONSULTANT

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  
**01 / 10 / 2014**

**Transaction ID : SA11.34423**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

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

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

**250.00**

**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 40 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT WALLACE**

Mailing Address **PO BOX 4184**

City **BELLEVUE** State **WA** Zip Code **98009-4184**

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

Name of Employer **WALLACE PROPERTIES, INC.** Occupation **REAL ESTATE INVESTMENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

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

**Transaction ID : SA11.34418**

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

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

Mailing Address **11801 GRAVELLY LAKE DRIVE**

City **LAKEWOOD** State **WA** Zip Code **98499-**

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 **5200.00**

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

**Transaction ID : SA11.34391**

Amount of Each Receipt this Period  
**2600.00**  
 CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**3600.00**

**81763.20**





**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 42 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC**

Mailing Address 1120 CONNECTICUT AVE NW

City WASHINGTON State DC Zip Code 20036-3905

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.34929**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC**

Mailing Address 1120 CONNECTICUT AVE NW

City WASHINGTON State DC Zip Code 20036-3905

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.34930**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN COUNCIL OF ENGINEERING PAC**

Mailing Address 1015 15TH ST NW FL 8

City WASHINGTON State DC Zip Code 20005-2605

FEC ID number of contributing federal political committee. **C C00010868**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.34934**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN NURSES ASSOC. PAC**

Mailing Address 8515 GEORGIA AVE STE 400

City State Zip Code  
SILVER SPRING MD 20910-3492

FEC ID number of contributing federal political committee. **C C00017525**

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  
03 / 03 / 2014

**Transaction ID : SA11.34466**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN PHYSICAL THERAPY PAC**

Mailing Address 1111 N FAIRFAX ST

City State Zip Code  
ALEXANDRIA VA 22314-1484

FEC ID number of contributing federal political committee. **C C00012880**

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  
03 / 18 / 2014

**Transaction ID : SA11.34736**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY FOR CLINICAL LABORATORY SCIENCE PAC**

Mailing Address 2025 M ST NW STE 800

City State Zip Code  
WASHINGTON DC 20036-2422

FEC ID number of contributing federal political committee. **C C00034645**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 20 / 2014

**Transaction ID : SA11.34452**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

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

2500.00

**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 44 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY OF ASSOC. EXECS PAC**

Mailing Address 1575 I ST NW

City WASHINGTON State DC Zip Code 20005-1105

FEC ID number of contributing federal political committee. **C** C00041566

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 Y Y  
 03 / 21 / 2014

**Transaction ID : SA11.34850**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN SPEECH-LANGUAGE-HEARING PAC**

Mailing Address 2200 RESEARCH BLVD

City ROCKVILLE State MD Zip Code 20850-3289

FEC ID number of contributing federal political committee. **C** C00210666

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 Y Y  
 03 / 27 / 2014

**Transaction ID : SA11.34854**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ASSOC FOR ADVANCED LIFE UNDERWRITING PAC**

Mailing Address 11921 FREEDOM DR STE 1100

City RESTON State VA Zip Code 20190-5634

FEC ID number of contributing federal political committee. **C** C00447565

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : SA11.34463**

Amount of Each Receipt this Period  
 2000.00

CONTRIBUTION

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

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

5500.00

**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 45 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>BNSF RAILPAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 18 / 2014
Mailing Address PO BOX 961039		<b>Transaction ID : SA11.34739</b>
City FORT WORTH	State TX	Zip Code 76161-0039
FEC ID number of contributing federal political committee. <b>C C00235739</b>	Amount of Each Receipt this Period 1500.00 CONTRIBUTION	
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 6000.00	

Full Name (Last, First, Middle Initial) <b>BNSF RAILPAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 18 / 2014
Mailing Address PO BOX 961039		<b>Transaction ID : SA11.34740</b>
City FORT WORTH	State TX	Zip Code 76161-0039
FEC ID number of contributing federal political committee. <b>C C00235739</b>	Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
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 6000.00	

Full Name (Last, First, Middle Initial) <b>BOMA PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 03 / 2014
Mailing Address 1201 NEW YORK AVE NW STE 300		<b>Transaction ID : SA11.34464</b>
City WASHINGTON	State DC	Zip Code 20005-3999
FEC ID number of contributing federal political committee. <b>C C00106435</b>	Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 111
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A. Full Name (Last, First, Middle Initial)**  
**BROOKE HOLDINGS & JACKSON NATL LIFE PAC**

Mailing Address 1 CORPORATE WAY

City LANSING State MI Zip Code 48951-1001

FEC ID number of contributing federal political committee. **C** C00254953

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  
01 / 23 / 2014

**Transaction ID : SA11.34404**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address 1201 15TH ST NW

City WASHINGTON State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C** C00000901

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  
02 / 11 / 2014

**Transaction ID : SA11.34448**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**C. Full Name (Last, First, Middle Initial)**  
**CARPENTERS' LEG. IMPROVEMENT COMM. PAC**

Mailing Address 101 CONSTITUTION AVE NW FL 10

City WASHINGTON State DC Zip Code 20001-2153

FEC ID number of contributing federal political committee. **C** C00001016

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  
03 / 31 / 2014

**Transaction ID : SA11.34944**

Amount of Each Receipt this Period  
5000.00  
CONTRIBUTION

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

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

7000.00

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

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

FOR LINE NUMBER: PAGE 47 OF 111  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**CH2M HILL COMPANIES PAC**

Mailing Address **9191 S JAMAICA ST**

City **ENGLEWOOD** State **CO** Zip Code **80112-5946**

FEC ID number of contributing federal political committee. **C C00143305**

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  
**03 / 18 / 2014**

**Transaction ID : SA11.34737**

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

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

Mailing Address **1500 MARKET ST**

City **PHILADELPHIA** State **PA** Zip Code **19102-2109**

FEC ID number of contributing federal political committee. **C C00248716**

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  
**03 / 27 / 2014**

**Transaction ID : SA11.34853**

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

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

Mailing Address **601 PENNSYLVANIA AVE NW**

City **WASHINGTON** State **DC** Zip Code **20004-2601**

FEC ID number of contributing federal political committee. **C C00007880**

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  
**03 / 21 / 2014**

**Transaction ID : SA11.34849**

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

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

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

**3000.00**

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

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

FOR LINE NUMBER: PAGE 48 OF 111  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

A. Full Name (Last, First, Middle Initial)  
**INDEPENDENT INSURANCE AGENTS PAC**

Mailing Address 412 1ST ST SE STE 300

City State Zip Code  
WASHINGTON DC 20003-1804

FEC ID number of contributing federal political committee. **C C00022343**

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  
 03 / 31 / 2014

**Transaction ID : SA11.34936**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**INVESTMENT COMPANY INSTITUTE PAC**

Mailing Address 1401 H ST NW # 1200

City State Zip Code  
WASHINGTON DC 20005-2110

FEC ID number of contributing federal political committee. **C C00105981**

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  
 03 / 18 / 2014

**Transaction ID : SA11.34735**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**LABORERS' POLITICAL LEAGUE SEATTLE**

Mailing Address 905 16TH ST., NW

City State Zip Code  
WASHINGTON DC 20006-1703

FEC ID number of contributing federal political committee. **C C00270413**

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  
 01 / 24 / 2014

**Transaction ID : SA11.34408**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

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

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

4500.00



**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 49 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN EMPLOYEES PAC**

Mailing Address 1550 CRYSTAL DR STE 300

City ARLINGTON State VA Zip Code 22202-4110

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 24 / 2014

**Transaction ID : SA11.34462**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 200 OCEANGATE, STE 100

City LONG BEACH State CA Zip Code 90802-4317

FEC ID number of contributing federal political committee. **C** C00430256

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.34940**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address 1585 BROADWAY FL 9

City NEW YORK State NY Zip Code 10036-8200

FEC ID number of contributing federal political committee. **C** C00337626

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.34931**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**NACS PAC**

Mailing Address 1600 DUKE ST

City ALEXANDRIA State VA Zip Code 22314-3466

FEC ID number of contributing federal political committee. **C C00126763**

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  
 02 / 04 / 2014

**Transaction ID : SA11.34429**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

Mailing Address 2901 TELESTAR COURT

City FALLS CHURCH State VA Zip Code 22042-1260

FEC ID number of contributing federal political committee. **C C00005249**

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  
 03 / 24 / 2014

**Transaction ID : SA11.34851**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL ALLIANCE OF FOREST OWNERS PAC**

Mailing Address 122 C ST NW STE 630

City WASHINGTON State DC Zip Code 20001-2148

FEC ID number of contributing federal political committee. **C C00469080**

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  
 03 / 05 / 2014

**Transaction ID : SA11.34468**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

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

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

4500.00

**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 51 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS ASSOC PAC**

Mailing Address 1325 MASSACHUSETTS AVE NW

City WASHINGTON State DC Zip Code 20005-4171

FEC ID number of contributing federal political committee. **C C00238725**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.34933**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS ASSOC PAC**

Mailing Address 1325 MASSACHUSETTS AVE NW

City WASHINGTON State DC Zip Code 20005-4171

FEC ID number of contributing federal political committee. **C C00238725**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.34942**

Amount of Each Receipt this Period  
 2000.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL COMMUNITY PHARMACISTS ASSOC PAC**

Mailing Address 100 DAINGERFIELD RD

City ALEXANDRIA State VA Zip Code 22314-6302

FEC ID number of contributing federal political committee. **C C00030809**

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  
 03 / 03 / 2014

**Transaction ID : SA11.34467**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

4000.00

**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 52 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**NEW YORK LIFE INSURANCE CO. PAC**

Mailing Address 51 MADISON AVE RM 1109

City NEW YORK State NY Zip Code 10010-1603

FEC ID number of contributing federal political committee. **C C00158881**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 18 / 2014

**Transaction ID : SA11.34741**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

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

Mailing Address 1605 KING ST

City ALEXANDRIA State VA Zip Code 22314-2726

FEC ID number of contributing federal political committee. **C C00089458**

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  
 03 / 31 / 2014

**Transaction ID : SA11.34937**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PAC OF THE AMERICAN ASSOC OF ORTHO. SURG**

Mailing Address 317 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002-5769

FEC ID number of contributing federal political committee. **C C00343137**

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  
 02 / 27 / 2014

**Transaction ID : SA11.34465**

Amount of Each Receipt this Period  
 1500.00  
 CONTRIBUTION

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A. Full Name (Last, First, Middle Initial)**  
**PUGET SOUND ENERGY PAC (PSE PAC)**

Mailing Address PO BOX 90608

City State Zip Code  
BELLEVUE WA 98009-

FEC ID number of contributing federal political committee. **C C00101592**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 13 / 2014

**Transaction ID : SA11.34450**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**B. Full Name (Last, First, Middle Initial)**  
**RAYONIER INC. GOOD GOVERNMENT PAC**

Mailing Address 1301 RIVERPLACE BLVD  
SUITE 2300

City State Zip Code  
JACKSONVILLE FL 32207-

FEC ID number of contributing federal political committee. **C C00451757**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 05 / 2014

**Transaction ID : SA11.34469**

Amount of Each Receipt this Period  
1500.00

CONTRIBUTION

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

Mailing Address 430 N MICHIGAN AVE

City State Zip Code  
CHICAGO IL 60611-4011

FEC ID number of contributing federal political committee. **C C00030718**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

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

**Transaction ID : SA11.34470**

Amount of Each Receipt this Period  
3000.00

CONTRIBUTION

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 54 OF 111  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**SMAC PAC**

Mailing Address **PO BOX 221230**

City **CHANTILLY** State **VA** Zip Code **20153-1230**

FEC ID number of contributing federal political committee. **C C00013961**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**03 / 31 / 2014**

**Transaction ID : SA11.34935**

Amount of Each Receipt this Period  
**2500.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**THE BOEING CO. PAC**

Mailing Address **1200 WILSON BLVD**

City **ARLINGTON** State **VA** Zip Code **22209-2300**

FEC ID number of contributing federal political committee. **C C00142711**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**10000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**03 / 18 / 2014**

**Transaction ID : SA11.34738**

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

**C.** Full Name (Last, First, Middle Initial)  
**THE FREEDOM PROJECT PAC**

Mailing Address **424 C ST NE**

City **WASHINGTON** State **DC** Zip Code **20002-5818**

FEC ID number of contributing federal political committee. **C C00305805**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**03 / 18 / 2014**

**Transaction ID : SA11.34742**

Amount of Each Receipt this Period  
**5000.00**  
CONTRIBUTION

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

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

**8500.00**

**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 55 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**THE WILLIAMS COMPANIES INC. PAC**

Mailing Address 1627 1ST ST NW STE 900

City State Zip Code  
WASHINGTON DC 20001-1101

FEC ID number of contributing federal political committee. **C C00040394**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 20 / 2014

**Transaction ID : SA11.34746**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

Mailing Address PO BOX 11586

City State Zip Code  
WASHINGTON DC 20008-0786

FEC ID number of contributing federal political committee. **C C00433060**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
9000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 18 / 2014

**Transaction ID : SA11.34744**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**UNION PACIFIC CORP. FUND EFFECTIVE GOVT.**

Mailing Address 600 13TH ST NW STE 340

City State Zip Code  
WASHINGTON DC 20005-3012

FEC ID number of contributing federal political committee. **C C00010470**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : SA11.34748**

Amount of Each Receipt this Period  
 121.26

CONTRIBUTION

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

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

3621.26

**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 56 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**UNION PACIFIC CORP. FUND EFFECTIVE GOVT.**

Mailing Address 600 13TH ST NW STE 340

City WASHINGTON State DC Zip Code 20005-3012

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 24 / 2014

**Transaction ID : SA11.34852**

Amount of Each Receipt this Period  
 1878.74

CONTRIBUTION

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

Mailing Address 55 GLENLAKE PKWY NE

City ATLANTA State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.34943**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WAL-MART STORES, INC. PAC FOR RESP. GOVT**

Mailing Address 702 SW 8TH ST

City BENTONVILLE State AR Zip Code 72716-6209

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014

**Transaction ID : SA11.34932**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

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

5378.74



**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 57 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**WEYERHAEUSER PAC**

Mailing Address 400 N CAPITOL ST NW STE 490

City WASHINGTON State DC Zip Code 20001-6509

FEC ID number of contributing federal political committee. **C** C00007948

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 11 / 2014

**Transaction ID : SA11.34472**

Amount of Each Receipt this Period  
 2000.00  
 CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2000.00

73500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. CLAUDE G.B. FONTHEIM</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 3054 DAVENPORT STREET NW		Amount of Each Disbursement this Period 37.65 <b>Transaction ID : SB17.34637</b>
City WASHINGTON State DC Zip Code 20008-2115	Purpose of Disbursement IN-KIND CONTRIBUTION	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. LUMMI INDIAN BUSINESS COUNCIL</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2014
Mailing Address 2616 KWINA RD		Amount of Each Disbursement this Period 595.00 <b>Transaction ID : SB17.34946</b>
City BELLINGHAM State WA Zip Code 98226-9291	Purpose of Disbursement IN-KIND CONTRIBUTION	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BLAKE VINTERTUN</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 12523 NE 128TH WAY H-10		Amount of Each Disbursement this Period 132.75 <b>Transaction ID : SB17.17233</b>
City KIRKLAND State WA Zip Code 98034	Purpose of Disbursement EXPENSE REIMBURSEMENT	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	765.40
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 06 / 2014</b>
Mailing Address <b>PO BOX 53852</b>		Amount of Each Disbursement this Period <b>29.05</b>
City <b>PHOENIX</b>	State <b>AZ</b>	
Zip Code <b>85072-3852</b>	Purpose of Disbursement <b>CREDIT CARD PROCESSING FEE</b>	<b>Transaction ID : SB17.I7173</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 14 / 2014</b>
Mailing Address <b>PO BOX 53852</b>		Amount of Each Disbursement this Period <b>3.91</b>
City <b>PHOENIX</b>	State <b>AZ</b>	
Zip Code <b>85072-3852</b>	Purpose of Disbursement <b>CREDIT CARD PROCESSING FEE</b>	<b>Transaction ID : SB17.I7174</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 14 / 2014</b>
Mailing Address <b>PO BOX 53852</b>		Amount of Each Disbursement this Period <b>3.91</b>
City <b>PHOENIX</b>	State <b>AZ</b>	
Zip Code <b>85072-3852</b>	Purpose of Disbursement <b>CREDIT CARD PROCESSING FEE</b>	<b>Transaction ID : SB17.I7175</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>36.87</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address PO BOX 53852		Amount of Each Disbursement this Period 0.87 <b>Transaction ID : SB17.I7176</b>
City PHOENIX	State AZ	
Zip Code 85072-3852	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address PO BOX 53852		Amount of Each Disbursement this Period 0.44 <b>Transaction ID : SB17.I7177</b>
City PHOENIX	State AZ	
Zip Code 85072-3852	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address PO BOX 53852		Amount of Each Disbursement this Period 8.82 <b>Transaction ID : SB17.I7178</b>
City PHOENIX	State AZ	
Zip Code 85072-3852	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10.13
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address PO BOX 53852		Amount of Each Disbursement this Period 1.60 <b>Transaction ID : SB17.I7179</b>
City PHOENIX	State AZ	
Zip Code 85072-3852	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address PO BOX 53852		Amount of Each Disbursement this Period 1.60 <b>Transaction ID : SB17.I7180</b>
City PHOENIX	State AZ	
Zip Code 85072-3852	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. ASPECT CONSULTING LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 8401 EXCELSIOR DRIVE SUITE 103		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : SB17.I7202</b>
City MADISON	State WI	
Zip Code 53717	Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	753.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. ASPECT CONSULTING LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 04 / 2014</b>
Mailing Address <b>8401 EXCELSIOR DRIVE SUITE 103</b>		Amount of Each Disbursement this Period <b>750.00</b> <b>Transaction ID : SB17.I7203</b>
City <b>MADISON</b> State <b>WI</b> Zip Code <b>53717</b>	Purpose of Disbursement <b>COMPLIANCE CONSULTING</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ASPECT CONSULTING LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 03 / 2014</b>
Mailing Address <b>8401 EXCELSIOR DRIVE SUITE 103</b>		Amount of Each Disbursement this Period <b>750.00</b> <b>Transaction ID : SB17.I7204</b>
City <b>MADISON</b> State <b>WI</b> Zip Code <b>53717</b>	Purpose of Disbursement <b>COMPLIANCE CONSULTING</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 20 / 2014</b>
Mailing Address <b>PO BOX 78522</b>		Amount of Each Disbursement this Period <b>614.13</b> <b>Transaction ID : SB17.I7210</b>
City <b>PHOENIX</b> State <b>AZ</b> Zip Code <b>85062-8522</b>	Purpose of Disbursement <b>PHONE BILL</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2114.13</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2014
Mailing Address PO BOX 78522		Amount of Each Disbursement this Period 490.12
City PHOENIX	State AZ	
Zip Code 85062-8522	Purpose of Disbursement PHONE BILL	Transaction ID : SB17.I7211
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014
Mailing Address 2800 NE 125TH ST		Amount of Each Disbursement this Period 139.25
City SEATTLE	State WA	
Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT *SEE ITEMIZATION*	Transaction ID : SB17.I7147
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 475 LENFANT PLZ SW		Amount of Each Disbursement this Period 66.00
City WASHINGTON	State DC	
Zip Code 20260-0001	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I7302
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	629.37
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2013
Mailing Address 175 BELLEVUE SQ		Amount of Each Disbursement this Period 73.25
City BELLEVUE State WA Zip Code 98004-5021	Purpose of Disbursement DATA SERVICE	
Candidate Name		Transaction ID : SB17.I7305
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014
Mailing Address 2800 NE 125TH ST		Amount of Each Disbursement this Period 177.57
City SEATTLE State WA Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT *SEE ITEMIZATION*	
Candidate Name		Transaction ID : SB17.I7148
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. ALASKA AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 7.00
City SEATTLE State WA Zip Code 98124-0948	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name		Transaction ID : SB17.I7249
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	177.57
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. ALASKA AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 7.00
City SEATTLE	State WA	
Zip Code 98124-0948	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I7250 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SHELL OIL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address PO BOX 2463		Amount of Each Disbursement this Period 54.05
City HOUSTON	State TX	
Zip Code 77252-2463	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I7289 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SHELL OIL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address PO BOX 2463		Amount of Each Disbursement this Period 56.54
City HOUSTON	State TX	
Zip Code 77252-2463	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I7290 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 111			
	<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)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address PO BOX 28870		Amount of Each Disbursement this Period 866.85
City TUCSON State AZ Zip Code 85726-8870	Purpose of Disbursement AIRFARE	
Candidate Name	Category/Type	Transaction ID : SB17.I7301 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 175 BELLEVUE SQ		Amount of Each Disbursement this Period 35.00
City BELLEVUE State WA Zip Code 98004-5021	Purpose of Disbursement DATA SERVICE	
Candidate Name	Category/Type	Transaction ID : SB17.I7307 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 2800 NE 125TH ST		Amount of Each Disbursement this Period 866.85
City SEATTLE State WA Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT *SEE ITEMIZATION*	
Candidate Name	Category/Type	Transaction ID : SB17.I7149
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	866.85
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. RASMUSSENREPORTS.COM</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 625 COOKMAN AVE STE 2			Amount of Each Disbursement this Period 19.95
City ASBURY PARK	State NJ	Zip Code 07712-7144	
Purpose of Disbursement SUBSCRIPTION		Category/ Type	<b>Transaction ID : SB17.I7282</b>  <b>[MEMO ITEM]</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. UNITED AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address PO BOX 28870			Amount of Each Disbursement this Period 644.90
City TUCSON	State AZ	Zip Code 85726-8870	
Purpose of Disbursement AIRFARE		Category/ Type	<b>Transaction ID : SB17.I7298</b>  <b>[MEMO ITEM]</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. UNITED AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address PO BOX 28870			Amount of Each Disbursement this Period 25.00
City TUCSON	State AZ	Zip Code 85726-8870	
Purpose of Disbursement AIRFARE		Category/ Type	<b>Transaction ID : SB17.I7299</b>  <b>[MEMO ITEM]</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address PO BOX 28870		Amount of Each Disbursement this Period 7 3 1 1 2 . 0 0 Transaction ID : SB17.I7300
City TUCSON State AZ Zip Code 85726-8870	Purpose of Disbursement AIRFARE	
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 175 BELLEVUE SQ		Amount of Each Disbursement this Period 5 0 . 0 0 Transaction ID : SB17.I7310
City BELLEVUE State WA Zip Code 98004-5021	Purpose of Disbursement DATA SERVICE	
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 2800 NE 125TH ST		Amount of Each Disbursement this Period 7 3 1 1 . 5 6 Transaction ID : SB17.I7150
City SEATTLE State WA Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT *SEE ITEMIZATION*	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7 3 1 1 . 5 6
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. ALASKA AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 261.00
City SEATTLE	State WA	
Zip Code 98124-0948	Purpose of Disbursement AIRFARE	Transaction ID : SB17.I7237
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ALASKA AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 579.80
City SEATTLE	State WA	
Zip Code 98124-0948	Purpose of Disbursement AIRFARE	Transaction ID : SB17.I7238
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ALASKA AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 623.80
City SEATTLE	State WA	
Zip Code 98124-0948	Purpose of Disbursement AIRFARE	Transaction ID : SB17.I7239
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. ALASKA AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 535.80
City SEATTLE	State WA	
Zip Code 98124-0948	Purpose of Disbursement AIRFARE	Transaction ID : SB17.I7240 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ALASKA AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2013
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 609.80
City SEATTLE	State WA	
Zip Code 98124-0948	Purpose of Disbursement AIRFARE	Transaction ID : SB17.I7241 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 814.00
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement DATABASE SOFTWARE	Transaction ID : SB17.I7258 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 814.00
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement DATABASE SOFTWARE	Transaction ID : SB17.I7259 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CONGRESSIONAL INSTITUTE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 1700 DIAGONAL ROAD. #730		Amount of Each Disbursement this Period 1423.00
City ALEXANDRIA	State VA	
Zip Code 22314	Purpose of Disbursement MEMBER RETREAT	Transaction ID : SB17.I7336 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MAILCHIMP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2013
Mailing Address 512 MEANS STREET SUITE 404		Amount of Each Disbursement this Period 150.00
City ATLANTA	State GA	
Zip Code 30318	Purpose of Disbursement EMAIL SERVICE	Transaction ID : SB17.I7270 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. REGISTER.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 575 8TH AVE FL 11		Amount of Each Disbursement this Period 27.95
City NEW YORK	State NY	
Zip Code 10018-3549	Purpose of Disbursement ONLINE SERVICES	Transaction ID : SB17.I7283 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. REGISTER.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 575 8TH AVE FL 11		Amount of Each Disbursement this Period 0.99
City NEW YORK	State NY	
Zip Code 10018-3549	Purpose of Disbursement ONLINE SERVICES	Transaction ID : SB17.I7284 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TAYLOR-MADE PRINTING</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 217 W STEWART AVE		Amount of Each Disbursement this Period 1471.42
City PUYALLUP	State WA	
Zip Code 98371	Purpose of Disbursement PRINTING	Transaction ID : SB17.I7295 <b>[MEMO ITEM]</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 2800 NE 125TH ST		Amount of Each Disbursement this Period 231.00
City SEATTLE	State WA	
Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT *SEE ITEMIZATION*	Transaction ID : SB17.I7151
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PUBLIC STORAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 13105 SE 30TH ST		Amount of Each Disbursement this Period 204.00
City BELLEVUE	State WA	
Zip Code 98005-4413	Purpose of Disbursement STORAGE	Transaction ID : SB17.I7279
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 175 BELLEVUE SQ		Amount of Each Disbursement this Period 30.00
City BELLEVUE	State WA	
Zip Code 98004-5021	Purpose of Disbursement DATA SERVICE	Transaction ID : SB17.I7313
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	231.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 2800 NE 125TH ST		Amount of Each Disbursement this Period 234.00
City SEATTLE	State WA	
Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT *SEE ITEMIZATION*	Transaction ID : SB17.I7152
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PUBLIC STORAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2014
Mailing Address 13105 SE 30TH ST		Amount of Each Disbursement this Period 204.00
City BELLEVUE	State WA	
Zip Code 98005-4413	Purpose of Disbursement STORAGE	Transaction ID : SB17.I7278
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2014
Mailing Address 175 BELLEVUE SQ		Amount of Each Disbursement this Period 30.00
City BELLEVUE	State WA	
Zip Code 98004-5021	Purpose of Disbursement DATA SERVICE	Transaction ID : SB17.I7312
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	234.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 2800 NE 125TH ST		Amount of Each Disbursement this Period 186.15
City SEATTLE	State WA Zip Code 98125-4331	
Purpose of Disbursement CREDIT CARD PAYMENT *SEE ITEMIZATION*		Transaction ID : SB17.I7153
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ALASKA AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 158.20
City SEATTLE	State WA Zip Code 98124-0948	
Purpose of Disbursement AIRFARE		Transaction ID : SB17.I7242
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. REGISTER.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2014
Mailing Address 575 8TH AVE FL 11		Amount of Each Disbursement this Period 27.95
City NEW YORK	State NY Zip Code 10018-3549	
Purpose of Disbursement ONLINE SERVICES		Transaction ID : SB17.I7285
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	186.15
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 22 / 2014</b>
Mailing Address <b>2800 NE 125TH ST</b>		Amount of Each Disbursement this Period <b>39.19</b> <b>Transaction ID : SB17.I7154</b>
City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98125-4331</b>	Purpose of Disbursement <b>CREDIT CARD PAYMENT *SEE ITEMIZATION*</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 22 / 2014</b>
Mailing Address <b>2800 NE 125TH ST</b>		Amount of Each Disbursement this Period <b>19.95</b> <b>Transaction ID : SB17.I7155</b>
City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98125-4331</b>	Purpose of Disbursement <b>CREDIT CARD PAYMENT *SEE ITEMIZATION*</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. RASMUSSENREPORTS.COM</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 16 / 2014</b>
Mailing Address <b>625 COOKMAN AVE STE 2</b>		Amount of Each Disbursement this Period <b>19.95</b> <b>Transaction ID : SB17.I7281</b> <b>[MEMO ITEM]</b>
City <b>ASBURY PARK</b> State <b>NJ</b> Zip Code <b>07712-7144</b>	Purpose of Disbursement <b>SUBSCRIPTION</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>59.14</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 2800 NE 125TH ST		Amount of Each Disbursement this Period 2542.03
City SEATTLE State WA Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT *SEE ITEMIZATION*	
Candidate Name	Category/Type	Transaction ID : SB17.I7156
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ALASKA AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 186.00
City SEATTLE State WA Zip Code 98124-0948	Purpose of Disbursement AIRFARE	
Candidate Name	Category/Type	Transaction ID : SB17.I7243 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ALASKA AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 548.10
City SEATTLE State WA Zip Code 98124-0948	Purpose of Disbursement AIRFARE	
Candidate Name	Category/Type	Transaction ID : SB17.I7244 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2542.03
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 111			
	<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)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. CMDI</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2014
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 814.00
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement DATABASE SOFTWARE	Transaction ID : SB17.I7256
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement MM / DD / YYYY 01 / 21 / 2014
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 814.00
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement DATABASE SOFTWARE	Transaction ID : SB17.I7257
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MAILCHIMP</b>		Date of Disbursement MM / DD / YYYY 01 / 24 / 2014
Mailing Address 512 MEANS STREET SUITE 404		Amount of Each Disbursement this Period 150.00
City ATLANTA	State GA	
Zip Code 30318	Purpose of Disbursement EMAIL SERVICE	Transaction ID : SB17.I7269
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. REGISTER.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 575 8TH AVE FL 11		Amount of Each Disbursement this Period 0.99
City NEW YORK	State NY	
Zip Code 10018-3549	Purpose of Disbursement ONLINE SERVICES	Transaction ID : SB17.I7286
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. REGISTER.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 575 8TH AVE FL 11		Amount of Each Disbursement this Period 27.95
City NEW YORK	State NY	
Zip Code 10018-3549	Purpose of Disbursement ONLINE SERVICES	Transaction ID : SB17.I7287
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. REGISTER.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 575 8TH AVE FL 11		Amount of Each Disbursement this Period 0.99
City NEW YORK	State NY	
Zip Code 10018-3549	Purpose of Disbursement ONLINE SERVICES	Transaction ID : SB17.I7288
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 24 / 2014</b>
Mailing Address <b>2800 NE 125TH ST</b>		Amount of Each Disbursement this Period <b>2488.73</b>
City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98125-4331</b>	Purpose of Disbursement <b>CREDIT CARD PAYMENT *SEE ITEMIZATION*</b>	
Candidate Name	Category/Type	<b>Transaction ID : SB17.I7157</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. COINFORCE.COM</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 23 / 2014</b>
Mailing Address <b>12525 BRIDGEPORT WAY SW</b>		Amount of Each Disbursement this Period <b>2254.73</b>
City <b>LAKEWOOD</b> State <b>WA</b> Zip Code <b>98499-7403</b>	Purpose of Disbursement <b>COINS</b>	
Candidate Name	Category/Type	<b>Transaction ID : SB17.I7262</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PUBLIC STORAGE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 03 / 2014</b>
Mailing Address <b>13105 SE 30TH ST</b>		Amount of Each Disbursement this Period <b>204.00</b>
City <b>BELLEVUE</b> State <b>WA</b> Zip Code <b>98005-4413</b>	Purpose of Disbursement <b>STORAGE</b>	
Candidate Name	Category/Type	<b>Transaction ID : SB17.I7277</b> <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2488.73</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 175 BELLEVUE SQ		Amount of Each Disbursement this Period 30.00
City BELLEVUE	State WA Zip Code 98004-5021	
Purpose of Disbursement DATA SERVICE	Candidate Name	Transaction ID : SB17.I7311
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 2800 NE 125TH ST		Amount of Each Disbursement this Period 823.95
City SEATTLE	State WA Zip Code 98125-4331	
Purpose of Disbursement CREDIT CARD PAYMENT *SEE ITEMIZATION*	Candidate Name	Transaction ID : SB17.I7158
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>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address PO BOX 78522		Amount of Each Disbursement this Period 29.58
City PHOENIX	State AZ Zip Code 85062-8522	
Purpose of Disbursement PHONE BILL	Candidate Name	Transaction ID : SB17.I7253
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	823.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2014
Mailing Address PO BOX 78522		Amount of Each Disbursement this Period 54.74
City PHOENIX	State AZ	
Zip Code 85062-8522	Purpose of Disbursement PHONE BILL	Transaction ID : SB17.I7255
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SHILO INN</b>		Date of Disbursement MM / DD / YYYY 01 / 29 / 2014
Mailing Address 707 OCEAN SHORES BLVD NW		Amount of Each Disbursement this Period 200.52
City OCEAN SHORES	State WA	
Zip Code 98569-9345	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I7291
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. U-HAUL</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2014
Mailing Address 13306 SE 30TH		Amount of Each Disbursement this Period 73.07
City BELLEVUE	State WA	
Zip Code 98005	Purpose of Disbursement TRUCK RENTAL	Transaction ID : SB17.I7296
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. U-HAUL</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 13306 SE 30TH		Amount of Each Disbursement this Period 40.94
City BELLEVUE	State WA	
Zip Code 98005	Purpose of Disbursement TRUCK RENTAL	Transaction ID : SB17.I7297
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 475 LENFANT PLZ SW		Amount of Each Disbursement this Period 6.60
City WASHINGTON	State DC	
Zip Code 20260-0001	Purpose of Disbursement BUSINESS REPLY MAIL FEES	Transaction ID : SB17.I7303
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 175 BELLEVUE SQ		Amount of Each Disbursement this Period 68.16
City BELLEVUE	State WA	
Zip Code 98004-5021	Purpose of Disbursement DATA SERVICE	Transaction ID : SB17.I7304
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 84 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 24 / 2014</b>
Mailing Address <b>2800 NE 125TH ST</b>		Amount of Each Disbursement this Period <b>348.94</b>
City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98125-4331</b>	Purpose of Disbursement <b>CREDIT CARD PAYMENT *SEE ITEMIZATION*</b>	
Candidate Name		<b>Transaction ID : SB17.I7159</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. ALASKA AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 20 / 2014</b>
Mailing Address <b>PO BOX 24948</b>		Amount of Each Disbursement this Period <b>10.00</b>
City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98124-0948</b>	Purpose of Disbursement <b>TRAVEL EXPENSE</b>	
Candidate Name		<b>Transaction ID : SB17.I7251</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 23 / 2014</b>
Mailing Address <b>PO BOX 78522</b>		Amount of Each Disbursement this Period <b>218.99</b>
City <b>PHOENIX</b> State <b>AZ</b> Zip Code <b>85062-8522</b>	Purpose of Disbursement <b>PHONE BILL</b>	
Candidate Name		<b>Transaction ID : SB17.I7254</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>348.94</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. RASMUSSENREPORTS.COM</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2014
Mailing Address 625 COOKMAN AVE STE 2			Amount of Each Disbursement this Period 99.95 Transaction ID : SB17.I7280
City ASBURY PARK	State NJ	Zip Code 07712-7144	
Purpose of Disbursement SUBSCRIPTION		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. VERIZON WIRELESS</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 175 BELLEVUE SQ			Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.I7308
City BELLEVUE	State WA	Zip Code 98004-5021	
Purpose of Disbursement DATA SERVICE		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2014
Mailing Address 175 BELLEVUE SQ			Amount of Each Disbursement this Period 50.00 Transaction ID : SB17.I7309
City BELLEVUE	State WA	Zip Code 98004-5021	
Purpose of Disbursement DATA SERVICE		Category/ Type	[MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 86 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 2800 NE 125TH ST		Amount of Each Disbursement this Period 305.01 <b>Transaction ID : SB17.I7160</b>
City SEATTLE State WA Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT *SEE ITEMIZATION*	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GODADDY.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 14455 N HAYDEN RD STE 219		Amount of Each Disbursement this Period 290.16 <b>Transaction ID : SB17.I7266</b> <b>[MEMO ITEM]</b>
City SCOTTSDALE State AZ Zip Code 85260-6947	Purpose of Disbursement ONLINE SERVICES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2014
Mailing Address 2800 NE 125TH ST		Amount of Each Disbursement this Period 290.38 <b>Transaction ID : SB17.I7161</b>
City SEATTLE State WA Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT *SEE ITEMIZATION*	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	595.39
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. ALASKA AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2014
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 7.00
City SEATTLE	State WA	
Zip Code 98124-0948	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I7248
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 175 BELLEVUE SQ		Amount of Each Disbursement this Period 35.00
City BELLEVUE	State WA	
Zip Code 98004-5021	Purpose of Disbursement DATA SERVICE	Transaction ID : SB17.I7306
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BANK OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 2800 NE 125TH ST		Amount of Each Disbursement this Period 2500.00
City SEATTLE	State WA	
Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT *SEE ITEMIZATION*	Transaction ID : SB17.I7235
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. ALASKA AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 884.00
City SEATTLE	State WA	
Zip Code 98124-0948	Purpose of Disbursement AIRFARE	Transaction ID : SB17.I7245
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ALASKA AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 744.00
City SEATTLE	State WA	
Zip Code 98124-0948	Purpose of Disbursement AIRFARE	Transaction ID : SB17.I7246
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ALASKA AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 722.00
City SEATTLE	State WA	
Zip Code 98124-0948	Purpose of Disbursement AIRFARE	Transaction ID : SB17.I7247
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 89 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial)

**A. MAILCHIMP**

Mailing Address 512 MEANS STREET  
SUITE 404

City ATLANTA State GA Zip Code 30318

Purpose of Disbursement EMAIL SERVICE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 24 / 2014

Amount of Each Disbursement this Period: 150.00

Transaction ID : SB17.I7268

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 03 / 2014

Amount of Each Disbursement this Period: 193.14

Transaction ID : SB17.I7169

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 28 / 2014

Amount of Each Disbursement this Period: 129.63

Transaction ID : SB17.I7170

**SUBTOTAL** of Disbursements This Page (optional)..... 322.77

**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 90 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 257.05
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I7171
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 182.47
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I7172
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. COSTCO</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 8629 120TH AVE NE		Amount of Each Disbursement this Period 206.33
City KIRKLAND	State WA	
Zip Code 98033-5822	Purpose of Disbursement EVENT FOOD & BEVERAGE	Transaction ID : SB17.I7213
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	645.85
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 111			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. HONDA CENTER</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 13291 SE 36TH ST		Amount of Each Disbursement this Period 502.07 <b>Transaction ID : SB17.I7195</b>
City BELLEVUE State WA Zip Code 98006-1328	Purpose of Disbursement CAMPAIGN VEHICLE LEASE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HONDA CENTER</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 13291 SE 36TH ST		Amount of Each Disbursement this Period 502.07 <b>Transaction ID : SB17.I7196</b>
City BELLEVUE State WA Zip Code 98006-1328	Purpose of Disbursement CAMPAIGN VEHICLE LEASE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. HONDA CENTER</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 13291 SE 36TH ST		Amount of Each Disbursement this Period 502.07 <b>Transaction ID : SB17.I7197</b>
City BELLEVUE State WA Zip Code 98006-1328	Purpose of Disbursement CAMPAIGN VEHICLE LEASE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1506.21
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A. MEMBER LUNCH FUND**

Full Name (Last, First, Middle Initial)  
Mailing Address 4711 30TH ST S APT B1

City ARLINGTON State VA Zip Code 22206-1554

Purpose of Disbursement MEMBERSHIP DUES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 06 / 2014

Amount of Each Disbursement this Period: 650.00

Transaction ID : SB17.I7184

**B. PAYROLLNW**

Full Name (Last, First, Middle Initial)  
Mailing Address 10000 NE 7TH AVE STE 402

City VANCOUVER State WA Zip Code 98685-4548

Purpose of Disbursement PAYROLL \*SEE ITEMIZATION\*

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 14 / 2014

Amount of Each Disbursement this Period: 1410.34

Transaction ID : SB17.I7193

**C. BLAKE VINTERTUN**

Full Name (Last, First, Middle Initial)  
Mailing Address 12523 NE 128TH WAY H-10

City KIRKLAND State WA Zip Code 98034

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 14 / 2014

Amount of Each Disbursement this Period: 1410.34

Transaction ID : SB17.I7326

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... 2060.34

**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 93 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. PAYROLLNW</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 14 / 2014</b>
Mailing Address <b>10000 NE 7TH AVE STE 402</b>		Amount of Each Disbursement this Period <b>546.69</b> <b>Transaction ID : SB17.I7194</b>
City <b>VANCOUVER</b> State <b>WA</b> Zip Code <b>98685-4548</b>	Purpose of Disbursement <b>PAYROLL TAX</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PAYROLLNW</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 14 / 2014</b>
Mailing Address <b>10000 NE 7TH AVE STE 402</b>		Amount of Each Disbursement this Period <b>154.75</b> <b>Transaction ID : SB17.I7205</b>
City <b>VANCOUVER</b> State <b>WA</b> Zip Code <b>98685-4548</b>	Purpose of Disbursement <b>PAYROLL PROCESSING FEE</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PAYROLLNW</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 30 / 2014</b>
Mailing Address <b>10000 NE 7TH AVE STE 402</b>		Amount of Each Disbursement this Period <b>1410.34</b> <b>Transaction ID : SB17.I7206</b>
City <b>VANCOUVER</b> State <b>WA</b> Zip Code <b>98685-4548</b>	Purpose of Disbursement <b>PAYROLL *SEE ITEMIZATION*</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2111.78</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. BLAKE VINTERTUN</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 12523 NE 128TH WAY H-10		Amount of Each Disbursement this Period 1410.34
City KIRKLAND	State WA	
Zip Code 98034	Purpose of Disbursement PAYROLL	Transaction ID : SB17.I7327
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PAYROLLNW</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 10000 NE 7TH AVE STE 402		Amount of Each Disbursement this Period 546.69
City VANCOUVER	State WA	
Zip Code 98685-4548	Purpose of Disbursement PAYROLL TAX	Transaction ID : SB17.I7207
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PAYROLLNW</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 10000 NE 7TH AVE STE 402		Amount of Each Disbursement this Period 1410.34
City VANCOUVER	State WA	
Zip Code 98685-4548	Purpose of Disbursement PAYROLL *SEE ITEMIZATION*	Transaction ID : SB17.I7218
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1957.03
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. BLAKE VINTERTUN</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014		
Mailing Address 12523 NE 128TH WAY H-10			Amount of Each Disbursement this Period 1410.34		
City KIRKLAND	State WA	Zip Code 98034	Transaction ID : SB17.I7328  [MEMO ITEM]		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>B. PAYROLLNW</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014		
Mailing Address 10000 NE 7TH AVE STE 402			Amount of Each Disbursement this Period 546.69		
City VANCOUVER	State WA	Zip Code 98685-4548	Transaction ID : SB17.I7219		
Purpose of Disbursement PAYROLL TAX		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) <b>C. PAYROLLNW</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2014		
Mailing Address 10000 NE 7TH AVE STE 402			Amount of Each Disbursement this Period 75.90		
City VANCOUVER	State WA	Zip Code 98685-4548	Transaction ID : SB17.I7220		
Purpose of Disbursement PAYROLL PROCESSING FEE		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	622.59
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A. PAYROLLNW**

Full Name (Last, First, Middle Initial)  
Mailing Address 10000 NE 7TH AVE STE 402

City VANCOUVER State WA Zip Code 98685-4548

Purpose of Disbursement PAYROLL \*SEE ITEMIZATION\*

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 27 / 2014

Amount of Each Disbursement this Period: 2776.73

Transaction ID : SB17.I7221

**B. JOEL BAXTER**

Full Name (Last, First, Middle Initial)  
Mailing Address 23 WEST GALER STREET #400

City SEATTLE State WA Zip Code 98119

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 27 / 2014

Amount of Each Disbursement this Period: 1366.39

Transaction ID : SB17.I7330

[MEMO ITEM]

**C. BLAKE VINTERTUN**

Full Name (Last, First, Middle Initial)  
Mailing Address 12523 NE 128TH WAY H-10

City KIRKLAND State WA Zip Code 98034

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 27 / 2014

Amount of Each Disbursement this Period: 1410.34

Transaction ID : SB17.I7329

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... 2776.73

**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 97 OF 111			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. PAYROLLNW</b>		Date of Disbursement										
Mailing Address 10000 NE 7TH AVE STE 402		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>27</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	02		27		2014
M M	/	D D	/	Y Y Y Y								
02		27		2014								
City	State	Zip Code										
VANCOUVER	WA	98685-4548										
Purpose of Disbursement PAYROLL TAX	<table border="1"> <tr> <td>Category/Type</td> </tr> <tr> <td></td> </tr> </table>		Category/Type									
Category/Type												
Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1028.03</td> </tr> </table>		1028.03									
1028.03												
Office Sought:	Disbursement For:											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State:      District:	Transaction ID : SB17.I7222											

Full Name (Last, First, Middle Initial) <b>B. PAYROLLNW</b>		Date of Disbursement										
Mailing Address 10000 NE 7TH AVE STE 402		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>13</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		13		2014
M M	/	D D	/	Y Y Y Y								
03		13		2014								
City	State	Zip Code										
VANCOUVER	WA	98685-4548										
Purpose of Disbursement PAYROLL *SEE ITEMIZATION*	<table border="1"> <tr> <td>Category/Type</td> </tr> <tr> <td></td> </tr> </table>		Category/Type									
Category/Type												
Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>3199.51</td> </tr> </table>		3199.51									
3199.51												
Office Sought:	Disbursement For:											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State:      District:	Transaction ID : SB17.I7223											

Full Name (Last, First, Middle Initial) <b>C. JOEL BAXTER</b>		Date of Disbursement										
Mailing Address 23 WEST GALER STREET #400		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>13</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	03		13		2014
M M	/	D D	/	Y Y Y Y								
03		13		2014								
City	State	Zip Code										
SEATTLE	WA	98119										
Purpose of Disbursement PAYROLL	<table border="1"> <tr> <td>Category/Type</td> </tr> <tr> <td></td> </tr> </table>		Category/Type									
Category/Type												
Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1789.17</td> </tr> </table>		1789.17									
1789.17												
Office Sought:	Disbursement For:											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State:      District:	Transaction ID : SB17.I7331  <b>[MEMO ITEM]</b>											

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"> <tr> <td>4227.54</td> </tr> </table>	4227.54
4227.54		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**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 98 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. BLAKE VINTERTUN</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014	
Mailing Address 12523 NE 128TH WAY H-10			Amount of Each Disbursement this Period 1410.34	
City KIRKLAND	State WA	Zip Code 98034	Transaction ID : SB17.I7335  [MEMO ITEM]	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. PAYROLLNW</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014	
Mailing Address 10000 NE 7TH AVE STE 402			Amount of Each Disbursement this Period 1263.19	
City VANCOUVER	State WA	Zip Code 98685-4548	Transaction ID : SB17.I7224	
Purpose of Disbursement PAYROLL TAX		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. PAYROLLNW</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014	
Mailing Address 10000 NE 7TH AVE STE 402			Amount of Each Disbursement this Period 85.53	
City VANCOUVER	State WA	Zip Code 98685-4548	Transaction ID : SB17.I7225	
Purpose of Disbursement PAYROLL PROCESSING FEE		Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1348.72
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. PAYROLLNW</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2014</b>
Mailing Address <b>10000 NE 7TH AVE STE 402</b>		Amount of Each Disbursement this Period <b>4560.77</b>
City <b>VANCOUVER</b> State <b>WA</b> Zip Code <b>98685-4548</b>	Purpose of Disbursement <b>PAYROLL *SEE ITEMIZATION*</b>	
Candidate Name	Category/Type	<b>Transaction ID : SB17.I7226</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOEL BAXTER</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2014</b>
Mailing Address <b>23 WEST GALER STREET #400</b>		Amount of Each Disbursement this Period <b>1792.71</b>
City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98119</b>	Purpose of Disbursement <b>PAYROLL</b>	
Candidate Name	Category/Type	<b>Transaction ID : SB17.I7322</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. FREDI SIMPSON</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2014</b>
Mailing Address <b>504 KITTITAS ST</b>		Amount of Each Disbursement this Period <b>818.33</b>
City <b>WENATCHEE</b> State <b>WA</b> Zip Code <b>98801-2808</b>	Purpose of Disbursement <b>PAYROLL</b>	
Candidate Name	Category/Type	<b>Transaction ID : SB17.I7323</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4560.77</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. BLAKE VINTERTUN</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2014</b>
Mailing Address <b>12523 NE 128TH WAY H-10</b>		Amount of Each Disbursement this Period <b>1410.96</b>
City <b>KIRKLAND</b>	State <b>WA</b>	
Zip Code <b>98034</b>	Purpose of Disbursement <b>PAYROLL</b>	<b>Transaction ID : SB17.I7324</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ARTHUR J. WHITTEN</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2014</b>
Mailing Address <b>233 3RD AVENUE N #19</b>		Amount of Each Disbursement this Period <b>538.77</b>
City <b>EDMONDS</b>	State <b>WA</b>	
Zip Code <b>98020</b>	Purpose of Disbursement <b>PAYROLL</b>	<b>Transaction ID : SB17.I7325</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PAYROLLNW</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 31 / 2014</b>
Mailing Address <b>10000 NE 7TH AVE STE 402</b>		Amount of Each Disbursement this Period <b>1631.14</b>
City <b>VANCOUVER</b>	State <b>WA</b>	
Zip Code <b>98685-4548</b>	Purpose of Disbursement <b>PAYROLL TAX</b>	<b>Transaction ID : SB17.I7227</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1631.14</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. PROGRESSIVE INSURANCE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 03 / 2014</b>
Mailing Address <b>PO BOX 105428</b>		Amount of Each Disbursement this Period <b>236.52</b>
City <b>ATLANTA</b>	State <b>GA</b>	Zip Code <b>30348-5428</b>
Purpose of Disbursement <b>INSURANCE</b>	Category/Type	
Candidate Name	Transaction ID : <b>SB17.I7162</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PROGRESSIVE INSURANCE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 29 / 2014</b>
Mailing Address <b>PO BOX 105428</b>		Amount of Each Disbursement this Period <b>236.54</b>
City <b>ATLANTA</b>	State <b>GA</b>	Zip Code <b>30348-5428</b>
Purpose of Disbursement <b>INSURANCE</b>	Category/Type	
Candidate Name	Transaction ID : <b>SB17.I7163</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ROANOKE CONFERENCE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 06 / 2014</b>
Mailing Address <b>6947 COAL CREEK PKWY SE, #139</b>		Amount of Each Disbursement this Period <b>500.00</b>
City <b>NEWCASTLE</b>	State <b>WA</b>	Zip Code <b>98056</b>
Purpose of Disbursement <b>EVENT REGISTRATION</b>	Category/Type	
Candidate Name	Transaction ID : <b>SB17.I7183</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>973.06</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. ROWLEY PROPERTY MANAGEMENT</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 13 / 2014</b>
Mailing Address 1595 NW GILMAN BLVD #1		Amount of Each Disbursement this Period <b>3500.00</b>
City ISSAQUAH State WA Zip Code 98027	Purpose of Disbursement OFFICE RENT	
Candidate Name		<b>Transaction ID : SB17.I7215</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. ROWLEY PROPERTY MANAGEMENT</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 21 / 2014</b>
Mailing Address 1595 NW GILMAN BLVD #1		Amount of Each Disbursement this Period <b>854.70</b>
City ISSAQUAH State WA Zip Code 98027	Purpose of Disbursement OFFICE RENT	
Candidate Name		<b>Transaction ID : SB17.I7216</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. ROWLEY PROPERTY MANAGEMENT</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 03 / 2014</b>
Mailing Address 1595 NW GILMAN BLVD #1		Amount of Each Disbursement this Period <b>1708.63</b>
City ISSAQUAH State WA Zip Code 98027	Purpose of Disbursement OFFICE RENT	
Candidate Name		<b>Transaction ID : SB17.I7217</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>6063.33</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. SPOT ON PRINTING &amp; DESIGN</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 14 / 2014</b>
Mailing Address <b>220 106TH AVE NE</b>		Amount of Each Disbursement this Period <b>318.42</b>
City <b>BELLEVUE</b> State <b>WA</b> Zip Code <b>98004-5728</b>	Purpose of Disbursement <b>PRINTING</b>	
Candidate Name	Category/Type	<b>Transaction ID : SB17.I7198</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SPOT ON PRINTING &amp; DESIGN</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 23 / 2014</b>
Mailing Address <b>220 106TH AVE NE</b>		Amount of Each Disbursement this Period <b>231.32</b>
City <b>BELLEVUE</b> State <b>WA</b> Zip Code <b>98004-5728</b>	Purpose of Disbursement <b>PRINTING</b>	
Candidate Name	Category/Type	<b>Transaction ID : SB17.I7199</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SPOT ON PRINTING &amp; DESIGN</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 03 / 2014</b>
Mailing Address <b>220 106TH AVE NE</b>		Amount of Each Disbursement this Period <b>94.84</b>
City <b>BELLEVUE</b> State <b>WA</b> Zip Code <b>98004-5728</b>	Purpose of Disbursement <b>PRINTING</b>	
Candidate Name	Category/Type	<b>Transaction ID : SB17.I7200</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>644.84</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. SPOT ON PRINTING &amp; DESIGN</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 07 / 2014</b>
Mailing Address <b>220 106TH AVE NE</b>		Amount of Each Disbursement this Period <b>683.96</b> <b>Transaction ID : SB17.I7201</b>
City <b>BELLEVUE</b> State <b>WA</b> Zip Code <b>98004-5728</b>	Purpose of Disbursement <b>PRINTING</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. STAFFORD STUDIOS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 06 / 2014</b>
Mailing Address <b>6270 SE 29TH WAY</b>		Amount of Each Disbursement this Period <b>320.00</b> <b>Transaction ID : SB17.I7181</b>
City <b>GRESHAM</b> State <b>OR</b> Zip Code <b>97080-8189</b>	Purpose of Disbursement <b>WEBSITE DEVELOPMENT</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE CATALYST GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 03 / 2014</b>
Mailing Address <b>600 PENNSYLVANIA AVE SE STE 330</b>		Amount of Each Disbursement this Period <b>554.51</b> <b>Transaction ID : SB17.I7164</b>
City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20003-6300</b>	Purpose of Disbursement <b>EVENT REIMBURSEMENT * SEE ITEMIZATION*</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1558.47</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 111	
	<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)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial)  
**A. ASSOCIATED GEN CONTRACTORS OF AMERICA**

Mailing Address 2300 WILSON BLVD STE 400

City ARLINGTON State VA Zip Code 22201-5426

Purpose of Disbursement  
EVENT RENTAL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
12 / 05 / 2013

Amount of Each Disbursement this Period  
150.00

Transaction ID : SB17.I7319

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. THE CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1801

Purpose of Disbursement  
EVENT CATERING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
12 / 12 / 2013

Amount of Each Disbursement this Period  
121.43

Transaction ID : SB17.I7316

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**C. W. MILLAR & CO**

Mailing Address 1335 14TH ST NW

City WASHINGTON State DC Zip Code 20005-3610

Purpose of Disbursement  
EVENT CATERING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
12 / 05 / 2013

Amount of Each Disbursement this Period  
283.08

Transaction ID : SB17.I7314

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. THE CATALYST GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 600 PENNSYLVANIA AVE SE STE 330		Amount of Each Disbursement this Period 4000.00 <b>Transaction ID : SB17.I7165</b>
City WASHINGTON State DC Zip Code 20003-6300	Purpose of Disbursement FUNDRAISING CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THE CATALYST GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 600 PENNSYLVANIA AVE SE STE 330		Amount of Each Disbursement this Period 649.83 <b>Transaction ID : SB17.I7166</b>
City WASHINGTON State DC Zip Code 20003-6300	Purpose of Disbursement EVENT REIMBURSEMENT *SEE ITEMIZATION*	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ASSOCIATED GEN CONTRACTORS OF AMERICA</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 2300 WILSON BLVD STE 400		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : SB17.I7318</b> <b>[MEMO ITEM]</b>
City ARLINGTON State VA Zip Code 22201-5426	Purpose of Disbursement EVENT RENTAL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4649.83
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. GEPETTO CATERING, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 4505 QUEENSBURY RD		Amount of Each Disbursement this Period 320.12
City RIVERDALE	State MD Zip Code 20737	
Purpose of Disbursement EVENT CATERING	Category/Type	<b>Transaction ID : SB17.I7320</b> <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THE CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 300 1ST ST SE		Amount of Each Disbursement this Period 179.71
City WASHINGTON	State DC Zip Code 20003-1801	
Purpose of Disbursement EVENT CATERING	Category/Type	<b>Transaction ID : SB17.I7317</b> <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE CATALYST GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 600 PENNSYLVANIA AVE SE STE 330		Amount of Each Disbursement this Period 4000.00
City WASHINGTON	State DC Zip Code 20003-6300	
Purpose of Disbursement FUNDRAISING CONSULTING	Category/Type	<b>Transaction ID : SB17.I7167</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. THE CATALYST GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 07 / 2014</b>
Mailing Address <b>600 PENNSYLVANIA AVE SE STE 330</b>		Amount of Each Disbursement this Period <b>4000.00</b> <b>Transaction ID : SB17.I7168</b>
City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20003-6300</b>	Purpose of Disbursement <b>FUNDRAISING CONSULTING</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THE VOYAGEUR COMPANY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 27 / 2014</b>
Mailing Address <b>100 EYE STREET SE #1108</b>		Amount of Each Disbursement this Period <b>31282.61</b> <b>Transaction ID : SB17.I7231</b>
City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20003</b>	Purpose of Disbursement <b>DIRECT MAIL</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE VOYAGEUR COMPANY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 03 / 2014</b>
Mailing Address <b>100 EYE STREET SE #1108</b>		Amount of Each Disbursement this Period <b>2500.00</b> <b>Transaction ID : SB17.I7232</b>
City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20003</b>	Purpose of Disbursement <b>FUNDRAISING CONSULTING</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>37782.61</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement MM / DD / YYYY <b>02 / 10 / 2014</b>
Mailing Address <b>475 LENFANT PLZ SW</b>		Amount of Each Disbursement this Period <b>92.00</b>
City <b>WASHINGTON</b>	State <b>DC</b>	
Zip Code <b>20260-0001</b>	Purpose of Disbursement <b>POSTAGE</b>	<b>Transaction ID : SB17.I7214</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement MM / DD / YYYY <b>02 / 19 / 2014</b>
Mailing Address <b>475 LENFANT PLZ SW</b>		Amount of Each Disbursement this Period <b>220.00</b>
City <b>WASHINGTON</b>	State <b>DC</b>	
Zip Code <b>20260-0001</b>	Purpose of Disbursement <b>BRM POSTAGE</b>	<b>Transaction ID : SB17.I7228</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement MM / DD / YYYY <b>02 / 19 / 2014</b>
Mailing Address <b>475 LENFANT PLZ SW</b>		Amount of Each Disbursement this Period <b>500.00</b>
City <b>WASHINGTON</b>	State <b>DC</b>	
Zip Code <b>20260-0001</b>	Purpose of Disbursement <b>BRM POSTAGE</b>	<b>Transaction ID : SB17.I7229</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>812.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

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

Mailing Address 475 LENFANT PLZ SW

City WASHINGTON State DC Zip Code 20260-0001

Purpose of Disbursement  
BRM POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
02 / 19 / 2014

Amount of Each Disbursement this Period  
685.00

Transaction ID : SB17.I7230

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

Mailing Address PO BOX 6995

City PORTLAND State OR Zip Code 97228-6995

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
01 / 13 / 2014

Amount of Each Disbursement this Period  
14.83

Transaction ID : SB17.I7188

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

Mailing Address PO BOX 6995

City PORTLAND State OR Zip Code 97228-6995

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
02 / 11 / 2014

Amount of Each Disbursement this Period  
19.01

Transaction ID : SB17.I7189

**SUBTOTAL** of Disbursements This Page (optional)..... 718.84

**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 111 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial) <b>A. WELLS FARGO</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 11 / 2014</b>
Mailing Address <b>PO BOX 6995</b>		Amount of Each Disbursement this Period <b>21.51</b>
City <b>PORTLAND</b> State <b>OR</b> Zip Code <b>97228-6995</b>	Purpose of Disbursement <b>BANK FEE</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.I7190</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. UNION PACIFIC CORP. FUND EFFECTIVE GOVT.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>03 / 24 / 2014</b>
Mailing Address <b>600 13TH ST NW STE 340</b>		Amount of Each Disbursement this Period <b>121.26</b>
City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20005-3012</b>	Purpose of Disbursement <b>IN-KIND CONTRIBUTION</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.34748</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WASHINGTON STATE REPUBLICAN PARTY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>01 / 06 / 2014</b>
Mailing Address <b>2840 NORTHUP WAY STE 140</b>		Amount of Each Disbursement this Period <b>200.00</b>
City <b>BELLEVUE</b> State <b>WA</b> Zip Code <b>98004-1433</b>	Purpose of Disbursement <b>OFFICE RENTAL</b>	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.I7182</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>342.77</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>103991.37</b>