

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.

12FE4M5

CLINT DIDIER FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 157

Check if different than previously reported. (ACC)

ELTOPIA

WA

99301

2. **FEC IDENTIFICATION NUMBER** ▼

C C00558502

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

WA

04

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ms CHARLOTTE BENJAMIN

Signature of Treasurer Ms CHARLOTTE BENJAMIN

[Electronically Filed]

Date

/ /

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

CLINT DIDIER FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 17 / 2014 To: M M / D D / Y Y Y Y 09 / 30 / 2014

	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))....	175005.44	393084.64
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	175005.44	393084.64
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	195065.54	316405.66
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	195065.54	316405.66
8. Cash on Hand at Close of Reporting Period (from Line 27).....	106678.98	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	30000.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

CLINT DIDIER FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	136462.00	309987.00
(ii) Unitemized.....	38543.44	83097.64
(iii) TOTAL of contributions from individuals ▶	175005.44	393084.64
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	175005.44	393084.64
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	30000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	30000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	175005.44	423084.64

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	195065.54	316405.66
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	195065.54	316405.66

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	126739.08
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	175005.44
25. SUBTOTAL (add Line 23 and Line 24).....	301744.52
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	195065.54
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	106678.98

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

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

FOR LINE NUMBER: PAGE 5 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms ANDREE ALTON

Mailing Address 712 N LANCASHIRE LN

City State Zip Code
LIBERTY LAKE WA 99019

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
3600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11AI.6769

Amount of Each Receipt this Period
 1000.00

DONATION

B. Full Name (Last, First, Middle Initial)
Ms ANDREE ALTON

Mailing Address 712 N LANCASHIRE LN

City State Zip Code
LIBERTY LAKE WA 99019

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
4100.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014

Transaction ID : SA11AI.8062

Amount of Each Receipt this Period
 500.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. DUANE ALTON

Mailing Address 712 N LANCASHIRE

City State Zip Code
LIBERTY LAKE WA 99019

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
3600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11AI.6770

Amount of Each Receipt this Period
 1000.00

DONATION

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 6 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. DUANE ALTON

Mailing Address 712 N LANCASHIRE

City LIBERTY LAKE State WA Zip Code 99019

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
4100.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014

Transaction ID : SA11AI.8063

Amount of Each Receipt this Period
500.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. MARK ANDERSON

Mailing Address 910 S ANDERSON RD

City ELLENSBURG State WA Zip Code 98926

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

Name of Employer ANDERSON HAY & GRAIN CO, INC Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2014

Transaction ID : SA11AI.6868

Amount of Each Receipt this Period
2600.00

DONATION

C. Full Name (Last, First, Middle Initial)
ANDY HARRIS FOR CONGRESS

Mailing Address 13401 REDCOAT LN

City PHOENIX State MD Zip Code 21131

FEC ID number of contributing federal political committee. **C** C00435974

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
 09 / 19 / 2014

Transaction ID : SA11AI.7988

Amount of Each Receipt this Period
1000.00

DONATION

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. H ARTHUR ARIANS

Mailing Address 32 SKOKOMISH WAY

City LACONNER State WA Zip Code 98257

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 Y Y
08 / 27 / 2014

Transaction ID : SA11AI.7440

Amount of Each Receipt this Period
100.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. JAMES BELL

Mailing Address 315 N 3RD ST

City YAKIMA State WA Zip Code 98901

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

Name of Employer BELL & UPTON LAND SURVEYING Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

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

Transaction ID : SA11AI.7826

Amount of Each Receipt this Period
400.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms LORRIE BENSEL

Mailing Address 227 W DAYTON AVE

City DAYTON State WA Zip Code 99328

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

Name of Employer CITY OF DAYTON Occupation CLERK

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 06 / 2014

Transaction ID : SA11AI.6761

Amount of Each Receipt this Period
150.00

DONATION

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FRANK BERG

Mailing Address **PO BOX 127**

City **PATERSON** State **WA** Zip Code **99345**

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

Name of Employer **BERG FARMS LLC** Occupation **MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2775.00**

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

Transaction ID : SA11AI.7259

Amount of Each Receipt this Period
2600.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. ROBERT BINGHAM

Mailing Address **320-A W ENTIAT**

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

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 24 / 2014

Transaction ID : SA11AI.6591

Amount of Each Receipt this Period
100.00

DONATION

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

Mailing Address **PO BOX 7201**

City **WOODINVILLE** State **WA** Zip Code **98072**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 28 / 2014

Transaction ID : SA11AI.7464

Amount of Each Receipt this Period
500.00

DONATION

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

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

3200.00

**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 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. C D 'BUTCH' BOOKER

Mailing Address 41452 ST RT 195

City COLFAX State WA Zip Code 99111

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

Name of Employer KINCAID REAL ESTATE Occupation BROKER/AUCTIONEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2014

Transaction ID : SA11AI.7061

Amount of Each Receipt this Period
 250.00

DONATION

B. Full Name (Last, First, Middle Initial)
Ms CARLEEN BROPHY

Mailing Address PO BOX 1185

City JACKSON State WY Zip Code 83001

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
 07 / 06 / 2014

Transaction ID : SA11AI.6272

Amount of Each Receipt this Period
 3000.00

DONATION

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Ms CARLEEN BROPHY

Mailing Address PO BOX 1185

City JACKSON State WY Zip Code 83001

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
 07 / 06 / 2014

Transaction ID : SA11AI.6275

Amount of Each Receipt this Period
 -400.00

Redesignate: DONATION

[MEMO ITEM]

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 10 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms CARLEEN BROPHY

Mailing Address **PO BOX 1185**

City **JACKSON** State **WY** Zip Code **83001**

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
07 / 06 / 2014

Transaction ID : SA11AI.6276

Amount of Each Receipt this Period
 400.00

Redesignate:
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Ms BEVERLY CALAWAY

Mailing Address **210 RIDGEVIEW DR**

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

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

Name of Employer **CALAWAY CO** Occupation **CO-OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 5200.00

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

Transaction ID : SA11AI.8171

Amount of Each Receipt this Period
 2600.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. COURT CALAWAY

Mailing Address **210 RIDGEVIEW DR**

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

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

Name of Employer **CALAWAY CO** Occupation **CO-OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 5200.00

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

Transaction ID : SA11AI.8172

Amount of Each Receipt this Period
 2600.00

DONATION

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

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

5200.00

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

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

FOR LINE NUMBER: PAGE 11 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms KIMBERLY CEBE

Mailing Address **25843 33RD AVE S**

City **KENT** State **WA** Zip Code **98032**

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
07 / 17 / 2014

Transaction ID : SA11AI.6426

Amount of Each Receipt this Period
100.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. KEITH CHRISTENSEN

Mailing Address **2417 HARRIS AVE**

City **RICHLAND** State **WA** Zip Code **99354**

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

Name of Employer **CHRISTENSEN KING & ASSOCIATES** Occupation **PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

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

Transaction ID : SA11AI.7943

Amount of Each Receipt this Period
150.00

DONATION

C. Full Name (Last, First, Middle Initial)
CITIZENS UNITED

Mailing Address **1006 PENNSYLVANIA AVE SE**

City **WASHINGTON** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00295527**

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
09 / 16 / 2014

Transaction ID : SA11AI.7991

Amount of Each Receipt this Period
1000.00

DONATION

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 12 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr LAWRENCE CLEEK

Mailing Address 1111 BROWN ST

City WENATCHEE State WA Zip Code 98801

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **325.00**

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

Transaction ID : SA11AI.7589

Amount of Each Receipt this Period
125.00

DONATION

B. Full Name (Last, First, Middle Initial)
CLOUD 9 FARMS, LLC

Mailing Address 911 BIRCH RD

City PASCO State WA Zip Code 99301

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : SA11AI.6886

Amount of Each Receipt this Period
1500.00

DONATION - REIMB IN 4TH QTR

C. Full Name (Last, First, Middle Initial)
Mr. JASON COLBERG

Mailing Address 17750 33RD AVE NE

City LAKE FOREST PARK State WA Zip Code 98155

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

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

Transaction ID : SA11AI.6506

Amount of Each Receipt this Period
200.00

DONATION

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

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

1825.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. ERIC COUGHANOUR

Mailing Address 1294 COUNTRY RIDGE DR

City RICHLAND State WA Zip Code 99352

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

Name of Employer TRI-CITIES MID-COLUMBIA PHONE Occupation ACCOUNT 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
 09 / 03 / 2014

Transaction ID : SA11AI.7150

Amount of Each Receipt this Period
1000.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. CLIFF COURTNEY

Mailing Address 101 N MAIN ST

City STEHEKIN State WA Zip Code 98852

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

Name of Employer STEHEKIN VALLEY RANCH LLC Occupation 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 Y Y
 09 / 03 / 2014

Transaction ID : SA11AI.7172

Amount of Each Receipt this Period
1000.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. JAMES CURRY

Mailing Address 12408 127TH AVE NE

City LAKE STEVENS State WA Zip Code 98258

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

Name of Employer AERO'CE CONSU'ING & ENGINE'ING Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11AI.7175

Amount of Each Receipt this Period
500.00

DONATION

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 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. MICHAEL DARLAND

Mailing Address 2021 102ND PL SE

City State Zip Code
BELLEVUE WA 98004

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11AI.6973

Amount of Each Receipt this Period
500.00

DONATION

B. Full Name (Last, First, Middle Initial)
Ms MYRNA DARLAND

Mailing Address 2021 102ND PL SE

City State Zip Code
BELLEVUE WA 98004

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11AI.6974

Amount of Each Receipt this Period
500.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms MARGARET DAVIS

Mailing Address 1423 MARSHALL AVE

City State Zip Code
RICHLAND WA 99354

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.7475

Amount of Each Receipt this Period
250.00

DONATION

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 103
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) Mr. WILLIAM DAVIS		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2014	
Mailing Address 1423 MARSHALL AVE		Transaction ID : SA11AI.7477	
City RICHLAND	State WA	Zip Code 99354	Amount of Each Receipt this Period _____ 250.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00 _____		

Full Name (Last, First, Middle Initial) Mr. MICHAEL DEAN		Date of Receipt M M / D D / Y Y Y Y 07 / 27 / 2014	
Mailing Address 1719 S PERRY CT		Transaction ID : SA11AI.6537	
City KENNEWICK	State WA	Zip Code 99338	Amount of Each Receipt this Period _____ 250.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer SELF-EMPLOYED	Occupation DENTIST		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00 _____		

Full Name (Last, First, Middle Initial) Mr. MICHAEL DEAN		Date of Receipt M M / D D / Y Y Y Y 07 / 27 / 2014	
Mailing Address 1719 S PERRY CT		Transaction ID : SA11AI.6539	
City KENNEWICK	State WA	Zip Code 99338	Amount of Each Receipt this Period _____ 250.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer SELF-EMPLOYED	Occupation DENTIST		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00 _____		

SUBTOTAL of Receipts This Page (optional).....	_____ 750.00 _____
TOTAL This Period (last page this line number only).....	_____ _____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) Mr. MICHAEL DEAN		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2014	
Mailing Address 1719 S PERRY CT		Transaction ID : SA11AI.6880	
City KENNEWICK	State WA	Zip Code 99338	Amount of Each Receipt this Period _____ 250.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer SELF-EMPLOYED	Occupation DENTIST		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 750.00		

Full Name (Last, First, Middle Initial) Mr. MICHAEL DEAN		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2014	
Mailing Address 1719 S PERRY CT		Transaction ID : SA11AI.7720	
City KENNEWICK	State WA	Zip Code 99338	Amount of Each Receipt this Period _____ 250.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer SELF-EMPLOYED	Occupation DENTIST		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) Ms ALICE DIDIER		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 444 HOLLY DR		Transaction ID : SA11AI.7694	
City ELTOPIA	State WA	Zip Code 99330	Amount of Each Receipt this Period _____ 2600.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer DIDIER FARMS, LLC	Occupation OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 5200.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 3100.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

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

Mailing Address 1775 FIR RD

City State Zip Code
ELTOPIA WA 99330

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

Name of Employer Occupation
DIDIER FARMS LLC SUPERVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

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

Transaction ID : SA11AI.7983

Amount of Each Receipt this Period
250.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. CURT DIDIER

Mailing Address 1880 HOLLY DR

City State Zip Code
ELTOPIA WA 99330

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

Name of Employer Occupation
DIDIER FARMS LLC GENERAL MGR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 02 / 2014

Transaction ID : SA11AI.6704

Amount of Each Receipt this Period
1300.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms MELINDA DIDIER

Mailing Address 1880 HOLLY DR

City State Zip Code
ELTOPIA WA 99330

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 02 / 2014

Transaction ID : SA11AI.6705

Amount of Each Receipt this Period
1300.00

DONATION

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

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

2850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ms ELAINE DIETRICH		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 439 W SUNSET DR		Transaction ID : SA11AI.7816	
City BURBANK	State WA	Zip Code 99323	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation HOMEMAKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00		
		DONATION	

Full Name (Last, First, Middle Initial) B. Mr. GLENN M DOBBS		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2014	
Mailing Address 905 W RIVERSIDE, STE 311		Transaction ID : SA11AI.8207	
City SPOKANE	State WA	Zip Code 99201	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer MINES MGMT INC	Occupation CHAIRMAN & CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		
		DONATION	

Full Name (Last, First, Middle Initial) C. Mr. DANIEL DUFAULT		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address PO BOX 5, 34610 E CHRISTY RD		Transaction ID : SA11AI.7166	
City PLYMOUTH	State WA	Zip Code 99346	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer EMMANUEL ENTERPRISES, INC	Occupation FARMER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00		
		DONATION	

SUBTOTAL of Receipts This Page (optional).....	2600.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. CHARLES EATON

Mailing Address 5549 28TH AVE NE

City SEATTLE State WA Zip Code 98105

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

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

Transaction ID : SA11AI.7358

Amount of Each Receipt this Period
200.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. ROBERT EBERLE

Mailing Address 9570 MCGLINN DR

City LACONNER State WA Zip Code 98257

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

Name of Employer EBERLE COMM. GROUP Occupation SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11AI.6527

Amount of Each Receipt this Period
100.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. ROBERT EBERLE

Mailing Address 9570 MCGLINN DR

City LACONNER State WA Zip Code 98257

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

Name of Employer EBERLE COMM. GROUP Occupation SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 06 / 2014

Transaction ID : SA11AI.7548

Amount of Each Receipt this Period
100.00

DONATION

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

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

400.00

**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 20 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) ELTOPIA IRRIGATION, LLC		Date of Receipt M M / D D / Y Y Y Y 07 / 22 / 2014	
Mailing Address 2481 E SAGEMOOR RD		Transaction ID : SA11AI.6570	
City PASCO	State WA	Zip Code 99301	Amount of Each Receipt this Period 350.00 DONATION - REIMB 4TH QTR
FEC ID number of contributing federal political committee. C			
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 350.00	

Full Name (Last, First, Middle Initial) FAMILY RESEARCH COUNCIL ACTION PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 02 / 2014	
Mailing Address 801 G ST NW		Transaction ID : SA11AI.7231	
City WASHINGTON	State DC	Zip Code 20001	Amount of Each Receipt this Period 1000.00 DONATION
FEC ID number of contributing federal political committee. C C00452383			
Name of Employer		Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Ms ELAINE FISCHER		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2014	
Mailing Address PO BOX 17160		Transaction ID : SA11AI.7487	
City COVINGTON	State KY	Zip Code 41017	Amount of Each Receipt this Period 1300.00 DONATION
FEC ID number of contributing federal political committee. C			
Name of Employer FISCHER HOMES		Occupation VICE PRESIDENT	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1300.00	

SUBTOTAL of Receipts This Page (optional).....	2650.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 103
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. GREG FISCHER		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2014	
Mailing Address PO BOX 17180		Transaction ID : SA11AI.7483	
City COVINGTON	State KY	Zip Code 41017	Amount of Each Receipt this Period _____ 2600.00 DONATION
FEC ID number of contributing federal political committee.		C	
Name of Employer FISCHER HOMES	Occupation EXECUTIVE VICE PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2600.00		

Full Name (Last, First, Middle Initial) B. Mr. HENRY FISCHER		Date of Receipt M M / D D / Y Y Y Y 08 / 22 / 2014	
Mailing Address PO BOX 17160		Transaction ID : SA11AI.7485	
City COVINGTON	State KY	Zip Code 41017	Amount of Each Receipt this Period _____ 1300.00 DONATION
FEC ID number of contributing federal political committee.		C	
Name of Employer FISCHER HOMES	Occupation PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1300.00		

Full Name (Last, First, Middle Initial) C. FRANKLIN COUNTY REPUBLICAN CENTRAL COMMITTEE		Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2014	
Mailing Address PO BOX 4390		Transaction ID : SA11AI.7660	
City PASCO	State WA	Zip Code 99302	Amount of Each Receipt this Period _____ 500.00 DONATION
FEC ID number of contributing federal political committee.		C	
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 _____ 3500.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 4400.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. DENIS FREDERICKSON		Date of Receipt M M / D D / Y Y Y Y 08 / 29 / 2014	
Mailing Address 1908 156TH ST NE		Transaction ID : SA11AI.6941	
City ARLINGTON	State WA	Zip Code 98223	Amount of Each Receipt this Period _____ 50.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) B. Mr. DENIS FREDERICKSON		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014	
Mailing Address 1908 156TH ST NE		Transaction ID : SA11AI.8051	
City ARLINGTON	State WA	Zip Code 98223	Amount of Each Receipt this Period _____ 50.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 300.00		

Full Name (Last, First, Middle Initial) C. FREEDOM'S DEFENSE FUND		Date of Receipt M M / D D / Y Y Y Y 08 / 02 / 2014	
Mailing Address 1155 15TH ST, NW STE 410		Transaction ID : SA11AI.6708	
City WASHINGTON	State DC	Zip Code 20005	Amount of Each Receipt this Period _____ 2500.00 DONATION
FEC ID number of contributing federal political committee.		_____ C C00401786 _____	
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 _____ 2500.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 2600.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FREEDOM'S DEFENSE FUND

Mailing Address 1155 15TH ST, NW
STE 410

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00401786

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
09 / 04 / 2014

Transaction ID : SA11AI.7686

Amount of Each Receipt this Period
2500.00

DONATION

B. Full Name (Last, First, Middle Initial)
Ms MARY GANO

Mailing Address 1294 WHITE BLUFFS ST

City State Zip Code
RICHLAND WA 99352

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : SA11AI.6839

Amount of Each Receipt this Period
100.00

DONATION

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

Mailing Address 2470 DANIELLS BRIDGE RD, STE 121

City State Zip Code
ATHENS GA 30606

FEC ID number of contributing federal political committee. **C** C00490235

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
09 / 17 / 2014

Transaction ID : SA11AI.8194

Amount of Each Receipt this Period
1000.00

DONATION

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

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

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. GREGORY GERSON		Date of Receipt M M / D D / Y Y Y Y 07 / 22 / 2014	
Mailing Address 5015 ROBERT WAY DR		Transaction ID : SA11AI.6471	
City PASCO	State WA	Zip Code 99301	Amount of Each Receipt this Period 100.00 DONATION
FEC ID number of contributing federal political committee. C			
Name of Employer NORTH FRANKLIN SCHOOL DISTRICT	Occupation EDUCATOR		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) B. Mr. GREGORY GERSON		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address 5015 ROBERT WAY DR		Transaction ID : SA11AI.7084	
City PASCO	State WA	Zip Code 99301	Amount of Each Receipt this Period 100.00 DONATION
FEC ID number of contributing federal political committee. C			
Name of Employer NORTH FRANKLIN SCHOOL DISTRICT	Occupation EDUCATOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. Mr. GREGORY GERSON		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address 5015 ROBERT WAY DR		Transaction ID : SA11AI.7137	
City PASCO	State WA	Zip Code 99301	Amount of Each Receipt this Period 100.00 DONATION
FEC ID number of contributing federal political committee. C			
Name of Employer NORTH FRANKLIN SCHOOL DISTRICT	Occupation EDUCATOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00		

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 103
	<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)
CLINT DIDIER FOR CONGRESS

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

Mailing Address 531 LEVEY RD

City PASCO State WA Zip Code 99301

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

Name of Employer GORDON BROTHERS WINERY Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2014

Transaction ID : SA11AI.7656

Amount of Each Receipt this Period
 250.00

DONATION

B. Full Name (Last, First, Middle Initial)
Ms VICKI GORDON

Mailing Address 531 LEVEY RD

City PASCO State WA Zip Code 99301

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

Name of Employer GORDON BROTHERS WINERY Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2014

Transaction ID : SA11AI.7658

Amount of Each Receipt this Period
 250.00

DONATION

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

Mailing Address 5511 WRIGLEY DR

City PASCO State WA Zip Code 99301

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

Name of Employer URS CORP Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

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

Transaction ID : SA11AI.7501

Amount of Each Receipt this Period
 100.00

DONATION

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) Mr. JOHN GOULET		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2014	
Mailing Address 5511 WRIGLEY DR		Transaction ID : SA11AI.8042	
City PASCO	State WA	Zip Code 99301	Amount of Each Receipt this Period _____ 100.00 DONATION
FEC ID number of contributing federal political committee.		C	
Name of Employer URS CORP	Occupation ENGINEER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 325.00		

Full Name (Last, First, Middle Initial) Mr. BOYD GRANT		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2014	
Mailing Address 1516 W MARINA DR		Transaction ID : SA11AI.7276	
City MOSES LAKE	State WA	Zip Code 98837	Amount of Each Receipt this Period _____ 250.00 DONATION
FEC ID number of contributing federal political committee.		C	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) Ms FRANCIS GRANT		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2014	
Mailing Address 1516 W MARINA DR		Transaction ID : SA11AI.7278	
City MOSES LAKE	State WA	Zip Code 98837	Amount of Each Receipt this Period _____ 250.00 DONATION
FEC ID number of contributing federal political committee.		C	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 600.00
TOTAL This Period (last page this line number only).....	_____

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

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

FOR LINE NUMBER: PAGE 27 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms MARIAN GRAVENSLUND

Mailing Address 3500 S IRBY ST

City State Zip Code
KENNEWICK WA 99337

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

Name of Employer Occupation
GRAVENSLUND OPERATING CO PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

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

Transaction ID : SA11AI.8222

Amount of Each Receipt this Period
400.00

DONATION

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

Mailing Address 1350 GAGE BLVD

City State Zip Code
RICHLAND WA 99352

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.7088

Amount of Each Receipt this Period
100.00

DONATION

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

Mailing Address 1350 GAGE BLVD

City State Zip Code
RICHLAND WA 99352

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
350.00

Date of Receipt
 M M / D D / Y Y Y Y
09 19 2014

Transaction ID : SA11AI.7727

Amount of Each Receipt this Period
100.00

DONATION

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. BRENT HEINEN

Mailing Address 3590 LANGFORD RD

City State Zip Code
ELTOPIA WA 99330

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

Name of Employer Occupation
BRENT & SHERYL, LLC 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
07 / 24 / 2014

Transaction ID : SA11AI.6573

Amount of Each Receipt this Period
3000.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. BRENT HEINEN

Mailing Address 3590 LANGFORD RD

City State Zip Code
ELTOPIA WA 99330

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

Name of Employer Occupation
BRENT & SHERYL, LLC 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
07 / 24 / 2014

Transaction ID : SA11AI.6576

Amount of Each Receipt this Period
-400.00

Redesignate: DONATION

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Mr. BRENT HEINEN

Mailing Address 3590 LANGFORD RD

City State Zip Code
ELTOPIA WA 99330

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

Name of Employer Occupation
BRENT & SHERYL, LLC 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
07 / 24 / 2014

Transaction ID : SA11AI.6577

Amount of Each Receipt this Period
400.00

Redesignate:

[MEMO ITEM]

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 29 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) Mr. BRENT HEINEN		Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2014	
Mailing Address 3590 LANGFORD RD		Transaction ID : SA11AI.7961	
City ELTOPIA	State WA	Zip Code 99330	Amount of Each Receipt this Period _____ 1000.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer BRENT & SHERYL, LLC	Occupation OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 4000.00 _____		

Full Name (Last, First, Middle Initial) Mr. DONALD HEINEN		Date of Receipt M M / D D / Y Y Y Y 09 / 05 / 2014	
Mailing Address 105 BERKSHIRE LN		Transaction ID : SA11AI.7616	
City PASCO	State WA	Zip Code 99301	Amount of Each Receipt this Period _____ 500.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00 _____		

Full Name (Last, First, Middle Initial) Ms JUANITA HEINEN		Date of Receipt M M / D D / Y Y Y Y 07 / 24 / 2014	
Mailing Address 250 IRONWOOD RD		Transaction ID : SA11AI.6548	
City ELTOPIA	State WA	Zip Code 99330	Amount of Each Receipt this Period _____ 750.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 750.00 _____		

SUBTOTAL of Receipts This Page (optional).....	_____ 2250.00 _____
TOTAL This Period (last page this line number only).....	_____ _____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms JUANITA HEINEN

Mailing Address 250 IRONWOOD RD

City State Zip Code
ELTOPIA WA 99330

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 02 / 2014

Transaction ID : SA11AI.6682

Amount of Each Receipt this Period
50.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. KEVIN HEINEN

Mailing Address 410 N NEWPORT DR

City State Zip Code
MESA WA 99343

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

Name of Employer Occupation
LUCKY H FARMS INC PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 02 / 2014

Transaction ID : SA11AI.6707

Amount of Each Receipt this Period
2600.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms MILDRED HEINEN

Mailing Address 105 BERKSHIRE LN

City State Zip Code
PASCO WA 99301

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
 09 / 05 / 2014

Transaction ID : SA11AI.7619

Amount of Each Receipt this Period
500.00

DONATION

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

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

3150.00

**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 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms SHERYL HEINEN

Mailing Address 3590 LANGFORD

City State Zip Code
ELTOPIA WA 99330

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11AI.7962

Amount of Each Receipt this Period
 1000.00

DONATION

B. Full Name (Last, First, Middle Initial)
HELP-U-MOVE

Mailing Address 3412 N SWALLOW AVE

City State Zip Code
PASCO WA 99301

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

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

Transaction ID : SA11AI.7791

Amount of Each Receipt this Period
 800.00

DONATION - REIMB 4TH QTR

C. Full Name (Last, First, Middle Initial)
Mr. JEFF HENDLER

Mailing Address PO BOX 2757

City State Zip Code
PASCO WA 99302

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

Name of Employer Occupation
J D HENDLER ASSOCIATES OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11AI.6765

Amount of Each Receipt this Period
 250.00

DONATION

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

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

2050.00

**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 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. LORNE HOUSE

Mailing Address **PO BOX 9548**

City **YAKIMA** State **WA** Zip Code **98909**

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

Name of Employer **KLC LEASING, LTD** Occupation **CORPORATE OFFICER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

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

Transaction ID : SA11AI.7701

Amount of Each Receipt this Period
1000.00

DONATION

B. Full Name (Last, First, Middle Initial)
HOUSE LIBERTY FUND

Mailing Address **701 8TH ST NW, STE 500**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00542100**

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
09 / 18 / 2014

Transaction ID : SA11AI.7975

Amount of Each Receipt this Period
5000.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. DON HUNTZINGER

Mailing Address **501 RINGOLD RIVER RD**

City **MESA** State **WA** Zip Code **99343**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 25 / 2014

Transaction ID : SA11AI.6598

Amount of Each Receipt this Period
250.00

DONATION

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

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

6250.00

**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 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms TINY (VIOLET) HUNTZINGER

Mailing Address 501 RINGOLD RIVER RD

City MESA State WA Zip Code 99343

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014

Transaction ID : SA11AI.6599

Amount of Each Receipt this Period
250.00

DONATION

B. Full Name (Last, First, Middle Initial)
IRWIN RESEARCH & DEVELOPMENT, INC

Mailing Address PO BOX 10668

City YAKIMA State WA Zip Code 98909

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

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 Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.6958

Amount of Each Receipt this Period
500.00

DONATION - REIMB IN 4TH QTR

C. Full Name (Last, First, Middle Initial)
JIM JORDAN FOR CONGRESS

Mailing Address 2160 KETTERING TOWER, STE 2160

City DAYTON State OH Zip Code 45423

FEC ID number of contributing federal political committee. **C** C00416594

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
 09 / 10 / 2014

Transaction ID : SA11AI.7706

Amount of Each Receipt this Period
1000.00

DONATION

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

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

1750.00

**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 103
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ms KATIE JOHNSON		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address PO BOX 1413		Transaction ID : SA11AI.7810	
City RICHLAND	State WA	Zip Code 99352	Amount of Each Receipt this Period _____ 250.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer NORTHWEST CPA GRP PLLC	Occupation ACCOUNTANT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00 _____		

Full Name (Last, First, Middle Initial) B. Mr. THOMAS JOHNSON		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address PO BOX 1413		Transaction ID : SA11AI.7812	
City RICHLAND	State WA	Zip Code 99352	Amount of Each Receipt this Period _____ 250.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer WINDERMERE GRP ONE	Occupation REALTOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00 _____		

Full Name (Last, First, Middle Initial) C. Mr. JAMES KELLER		Date of Receipt M M / D D / Y Y Y Y 08 / 02 / 2014	
Mailing Address 18481 GREENBRIAR AVE		Transaction ID : SA11AI.7851	
City PRAIRIEVILLE	State LA	Zip Code 70769	Amount of Each Receipt this Period _____ 500.00 DONATION - EARMARKED THRU YAL PAC
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer COATING SYSTEMS & SUPPLY	Occupation PAINT DISTRIBUTOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00 _____		

SUBTOTAL of Receipts This Page (optional).....	_____ 1000.00 _____
TOTAL This Period (last page this line number only).....	_____ _____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
YOUNG AMERICANS FOR LIBERTY PAC

Mailing Address 3030 CLARENDON BLVD, STE 200

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00508739

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5810.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 02 / 2014

Transaction ID : SA11AI.7851.0

Amount of Each Receipt this Period
 500.00

TOTAL EARMARKED THRU CONDUIT-PAC LIMIT NOT AFFECTED
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Mr. JOSEPH KING

Mailing Address 8011 W QUINALT

City KENNEWICK State WA Zip Code 99336

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

Name of Employer Occupation
 SELF EMPLOYED SURGEON

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

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

Transaction ID : SA11AI.7085

Amount of Each Receipt this Period
 250.00

DONATION

C. Full Name (Last, First, Middle Initial)
Rep. RAUL R. REP. LABRADOR

Mailing Address U.S. HOUSE OF REPRESENTATIVES
 1523 LONGWORTH HOUSE OFFICE BUILDI

City WASHINGTON State DC Zip Code 20515

FEC ID number of contributing federal political committee. **C** H0ID01253

Name of Employer Occupation
 US HOUSE OF REPRESENTATIVES US REPRESENTATIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 27 / 2014

Transaction ID : SA11AI.8271

Amount of Each Receipt this Period
 500.00

DONATION

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms JOAN LARSEN

Mailing Address 3320 W PEARL ST

City PASCO State WA Zip Code 99301

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2014

Transaction ID : SA11AI.7663

Amount of Each Receipt this Period
 250.00

DONATION

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

Mailing Address 3320 W PEARL ST

City PASCO State WA Zip Code 99301

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2014

Transaction ID : SA11AI.7661

Amount of Each Receipt this Period
 250.00

DONATION

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

Mailing Address PO BOX 52188

City CASPER State WY Zip Code 82609

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.7999

Amount of Each Receipt this Period
 500.00

DONATION

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

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

1000.00

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

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

FOR LINE NUMBER: PAGE 37 OF 103
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms DEBORA LYLE

Mailing Address 902 S JOHNSON RD

City OTHELLO State WA Zip Code 99344

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.8198

Amount of Each Receipt this Period
 250.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. KEVIN LYLE

Mailing Address 902 S JOHNSON RD

City OTHELLO State WA Zip Code 99344

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

Name of Employer KEVIN LYLE FARM Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.8200

Amount of Each Receipt this Period
 250.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. HAL LYONS

Mailing Address PO BOX 195

City WENATCHEE State WA Zip Code 98801

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 01 / 2014

Transaction ID : SA11AI.7352

Amount of Each Receipt this Period
 400.00

DONATION

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

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

900.00

**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 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. DAVID MACHUGH

Mailing Address 660 DOGWOOD

City PASCO State WA Zip Code 99301

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

Name of Employer JACKASS MTN RANCH Occupation CO-OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.6606

Amount of Each Receipt this Period
 1000.00

DONATION

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

Mailing Address 267 VINCENT CT

City CENTRAL POINT State OR Zip Code 97502

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

Name of Employer SPORTS THERAPY ASSOCIATES INC Occupation SAFETY CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.7529

Amount of Each Receipt this Period
 150.00

DONATION

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

Mailing Address 267 VINCENT CT

City CENTRAL POINT State OR Zip Code 97502

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

Name of Employer SPORTS THERAPY ASSOCIATES INC Occupation SAFETY CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.7931

Amount of Each Receipt this Period
 100.00

DONATION

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 39 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MAKING A SENSIBLE SHIFT IN ELECTIONS PAC

Mailing Address PO BOX 821

City NEWPORT State KY Zip Code 41072

FEC ID number of contributing federal political committee. **C** C00563429

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
 09 / 23 / 2014

Transaction ID : SA11AI.8183

Amount of Each Receipt this Period
 2600.00

DONATION

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

Mailing Address 1858 OLD RESTON AVE, STE 206

City RESTON State VA Zip Code 20190

FEC ID number of contributing federal political committee. **C** C00233247

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
 07 / 28 / 2014

Transaction ID : SA11AI.6602

Amount of Each Receipt this Period
 1000.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. DAVID MASON

Mailing Address 2234 E CROSBY RD

City CARROLLTON State TX Zip Code 75006

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

Name of Employer Occupation
 VERIZON WIRELESS ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 02 / 2014

Transaction ID : SA11AI.7858

Amount of Each Receipt this Period
 250.00

DONATION EARMARKED THRU YAL PAC

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

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

3850.00

**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 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
YOUNG AMERICANS FOR LIBERTY PAC

Mailing Address 3030 CLARENDON BLVD, STE 200

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00508739

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6160.00

Date of Receipt
08 / 02 / 2014

Transaction ID : SA11AI.7858.0

Amount of Each Receipt this Period
250.00

TOTAL EARMARKED THRU CONDUIT-PAC LIMIT NOT AFFECTED
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Mr. GRANT MATHEWS

Mailing Address 9120 RUSSELL RD

City MESA State WA Zip Code 99343

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

Name of Employer Occupation
GRANT L MATHEWS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
08 / 31 / 2014

Transaction ID : SA11AI.7233

Amount of Each Receipt this Period
250.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms JILL MATHEWS

Mailing Address 9120 RUSSELL RD

City MESA State WA Zip Code 99343

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
08 / 31 / 2014

Transaction ID : SA11AI.7234

Amount of Each Receipt this Period
250.00

DONATION

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. JESSE MATTILA		Date of Receipt M M / D D / Y Y Y Y 09 / 06 / 2014	
Mailing Address 15533 NE LUCIA FALLS RD		Transaction ID : SA11AI.7102	
City BATTLE GROUND	State WA	Zip Code 98604	Amount of Each Receipt this Period _____ 500.00 DONATION
FEC ID number of contributing federal political committee.		C	
Name of Employer ALITE CONSTRUCTION	Occupation CONCRETE CONSTRUCTION		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) B. Ms CYNTHIA MCKAY		Date of Receipt M M / D D / Y Y Y Y 08 / 21 / 2014	
Mailing Address 3516 W 46TH AVE		Transaction ID : SA11AI.6896	
City KENNEWICK	State WA	Zip Code 99337	Amount of Each Receipt this Period _____ 500.00 DONATION
FEC ID number of contributing federal political committee.		C	
Name of Employer KENNEWICK SCHOOL DIST	Occupation TEACHER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) C. Mr. WILLIAM MCKAY		Date of Receipt M M / D D / Y Y Y Y 08 / 21 / 2014	
Mailing Address 3516 W 46TH AVE		Transaction ID : SA11AI.6898	
City KENNEWICK	State WA	Zip Code 99337	Amount of Each Receipt this Period _____ 500.00 DONATION
FEC ID number of contributing federal political committee.		C	
Name of Employer 27TH AVE SELF STORAGE	Occupation OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1500.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 1500.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) Mr. ROBERT MCLAUGHLIN		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2014	
Mailing Address 6119 SUMMITVIEW AVE HOUSE #14		Transaction ID : SA11AI.7109	
City YAKIMA	State WA	Zip Code 98908	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00		
DONATION			

Full Name (Last, First, Middle Initial) Mr. ROBERT MCLAUGHLIN		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2014	
Mailing Address 6119 SUMMITVIEW AVE HOUSE #14		Transaction ID : SA11AI.7505	
City YAKIMA	State WA	Zip Code 98908	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00		
DONATION			

Full Name (Last, First, Middle Initial) Mr. GARY MIDDLETON		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2014	
Mailing Address PO BOX 159		Transaction ID : SA11AI.7347	
City ELTOPIA	State WA	Zip Code 99330	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer GARY MIDDLETON FARMS INC	Occupation OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
DONATION			

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	[]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) MIDDLETON ORCHRDS, INC		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2014	
Mailing Address 4293 ELTOPIA WEST RD		Transaction ID : SA11AI.6888	
City ELTOPIA	State WA	Zip Code 99330	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00	
Name of Employer Occupation		DONATION - REIMB 4TH QTR	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) Mr. DAN MILDON		Date of Receipt M M / D D / Y Y Y Y 07 / 30 / 2014	
Mailing Address 94105 E REATA RD		Transaction ID : SA11AI.6647	
City KENNEWICK	State WA	Zip Code 99338	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Occupation NONE RETIRED		DONATION	
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) Ms SUSAN MISCHER		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2014	
Mailing Address 16222 67TH AVE NE		Transaction ID : SA11AI.6730	
City ARLINGTON	State WA	Zip Code 98223	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Occupation ELECTRIC MIRROR VICE PRESIDENT		DONATION	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 750.00	

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 103
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. CURTIS MOHR		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2014	
Mailing Address 2431 N COLUMBIA RIVER RD		Transaction ID : SA11AI.7837	
City PASCO State WA Zip Code 99301	Amount of Each Receipt this Period 625.00		
FEC ID number of contributing federal political committee. C	DONATION		
Name of Employer CURTIS T MOHR CLU CHFC MSFS Occupation MANAGER	Election Cycle-to-Date 625.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) B. Ms NADINE MOHR		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2014	
Mailing Address 2431 N COLUMBIA RIVER RD		Transaction ID : SA11AI.7839	
City PASCO State WA Zip Code 99301	Amount of Each Receipt this Period 625.00		
FEC ID number of contributing federal political committee. C	DONATION		
Name of Employer NONE Occupation RETIRED	Election Cycle-to-Date 625.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) C. Mr. SCOTT MUSSER		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address 3035 RICKENBACKER DR		Transaction ID : SA11AI.7177	
City PASCO State WA Zip Code 99301	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	DONATION		
Name of Employer MUSSER BROS INC Occupation AUCTIONEER	Election Cycle-to-Date 500.00		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	[]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms LOIS NELSON

Mailing Address 6808 W 15TH

City KENNEWICK State WA Zip Code 99338

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11AI.7543

Amount of Each Receipt this Period
250.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. ROBERT NELSON

Mailing Address 6808 W 15TH

City KENNEWICK State WA Zip Code 99338

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11AI.7542

Amount of Each Receipt this Period
250.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. STANLEY NELSON III

Mailing Address 651 NW 163RD

City SHORELINE State WA Zip Code 98177

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

Name of Employer NELSON CHEVROLET CO Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

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

Transaction ID : SA11AI.7010

Amount of Each Receipt this Period
200.00

DONATION

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

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

700.00

**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 46 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NO 9 HAY TRADING CO

Mailing Address 2550 HUNGRY JUNCTION RD

City State Zip Code
ELLENSBURG WA 98926

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11AI.7793

Amount of Each Receipt this Period
1000.00

DONATION - REIMB 4TH QTR

B. Full Name (Last, First, Middle Initial)
Ms ORA OTTMAR

Mailing Address 1365 MILBURN ST

City State Zip Code
WALLA WALLA WA 99362

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
225.00

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

Transaction ID : SA11AI.7302

Amount of Each Receipt this Period
50.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. DONALD PARKS

Mailing Address 412 RD 37

City State Zip Code
PASCO WA 99301

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
08 / 30 / 2014

Transaction ID : SA11AI.7397

Amount of Each Receipt this Period
100.00

DONATION

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

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

1150.00

**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 47 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAUL A BOUCHEY RANCH, INC		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2014	
Mailing Address 2310 EVANS RD		Transaction ID : SA11AI.7993	
City WAPATO	State WA	Zip Code 98951	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00	
Name of Employer Occupation		DONATION - REIMB 4TH QTR	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) B. Ms RICHELLE PAULBITSKI		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014	
Mailing Address 171 STARES LN		Transaction ID : SA11AI.8078	
City SEQUIM	State WA	Zip Code 98382	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer NONE Occupation RETIRED		DONATION	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) C. Mr. JOSEPH PAULY		Date of Receipt M M / D D / Y Y Y Y 07 / 24 / 2014	
Mailing Address 311 MILLWOOD LN		Transaction ID : SA11AI.6528	
City MESA	State WA	Zip Code 99343	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer SELF EMPLOYED Occupation CONTRACTOR		DONATION	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 750.00	

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	1050.00

**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 48 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. JOSEPH PAULY

Mailing Address 311 MILLWOOD LN

City MESA State WA Zip Code 99343

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

Name of Employer SELF EMPLOYED Occupation CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 29 / 2014

Transaction ID : SA11AI.6639

Amount of Each Receipt this Period
50.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. JOSEPH PAULY

Mailing Address 311 MILLWOOD LN

City MESA State WA Zip Code 99343

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

Name of Employer SELF EMPLOYED Occupation CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 27 / 2014

Transaction ID : SA11AI.6919

Amount of Each Receipt this Period
50.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. JOSEPH PAULY

Mailing Address 311 MILLWOOD LN

City MESA State WA Zip Code 99343

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

Name of Employer SELF EMPLOYED Occupation CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

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

Transaction ID : SA11AI.7092

Amount of Each Receipt this Period
50.00

DONATION

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

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

150.00

**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 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. JOSEPH PAULY

Mailing Address 311 MILLWOOD LN

City MESA State WA Zip Code 99343

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

Name of Employer SELF EMPLOYED Occupation CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **950.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : SA11AI.7785

Amount of Each Receipt this Period
50.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. JOSEPH PAULY

Mailing Address 311 MILLWOOD LN

City MESA State WA Zip Code 99343

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

Name of Employer SELF EMPLOYED Occupation CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

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

Transaction ID : SA11AI.7946

Amount of Each Receipt this Period
50.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms CAMILLE PETERSON

Mailing Address 1208 SUMMERHILL PL

City WENATCHEE State WA Zip Code 98801

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

Name of Employer CAMILLE H PETERSON Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

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

Transaction ID : SA11AI.7682

Amount of Each Receipt this Period
500.00

DONATION

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. DALE PETERSON

Mailing Address 1208 SUMMERHILL PL

City WENATCHEE State WA Zip Code 98801

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

Name of Employer PETERSON FAMILY ENTER'SES, LLC Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11AI.7680

Amount of Each Receipt this Period
500.00

DONATION

B. Full Name (Last, First, Middle Initial)
PHIPPS FARMS LLC

Mailing Address 1600 RANGER DR

City MESA State WA Zip Code 99343

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 01 / 2014

Transaction ID : SA11AI.7254

Amount of Each Receipt this Period
250.00

DONATION - REIMB 4TH QTR

C. Full Name (Last, First, Middle Initial)
Ms WYNNE PIERRET

Mailing Address 9590 SNAKE RIVER RD

City PASCO State WA Zip Code 99301

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

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

Transaction ID : SA11AI.7393

Amount of Each Receipt this Period
100.00

DONATION

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

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

850.00

**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 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. CHARLES PRESCOTT

Mailing Address 5220 W LATTIN RD

City WEST RICHLAND State WA Zip Code 99353

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11AI.7191

Amount of Each Receipt this Period
100.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. DANNY PUETZ

Mailing Address 333 NE 125TH ST

City SEATTLE State WA Zip Code 98125

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

Name of Employer MOTIVATED MOVERS Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

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

Transaction ID : SA11AI.8428

Amount of Each Receipt this Period
50.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms D'ANN RAMSEY

Mailing Address 8612 WHIPPLE DR

City PASCO State WA Zip Code 99301

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600.00**

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

Transaction ID : SA11AI.6807

Amount of Each Receipt this Period
2600.00

DONATION

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

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

2750.00

**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 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. JOHN RAMSEY

Mailing Address 8612 WHIPPLE DR

City PASCO State WA Zip Code 99301

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

Name of Employer BROADMOOR RV & TRUCK CENTER Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

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

Transaction ID : SA11AI.6808

Amount of Each Receipt this Period
2600.00

DONATION

B. Full Name (Last, First, Middle Initial)
RAUL LABRADOR FOR IDAHO

Mailing Address PO BOX 1616

City BOISE State ID Zip Code 83701

FEC ID number of contributing federal political committee. **C** C00470948

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
 09 / 27 / 2014

Transaction ID : SA11AI.8273

Amount of Each Receipt this Period
500.00

DONATION

C. Full Name (Last, First, Middle Initial)
REBUILD AMERICA PAC

Mailing Address 5745 SW 7TH ST, #283

City GAINESVILLE State FL Zip Code 32608

FEC ID number of contributing federal political committee. **C** C00567180

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
 09 / 29 / 2014

Transaction ID : SA11AI.8524

Amount of Each Receipt this Period
2000.00

DONATION

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

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

5100.00

**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 103
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ms RELLA REIMANN		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2014	
Mailing Address 111 MCCLENNY RD		Transaction ID : SA11AI.6836	
City PASCO State WA Zip Code 99301	Amount of Each Receipt this Period _____ 500.00 DONATION		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation T & R FARMS, INC CO-OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 750.00		

Full Name (Last, First, Middle Initial) B. RONALD REIMANN		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2014	
Mailing Address 111 MCCLENNY RD		Transaction ID : SA11AI.6835	
City PASCO State WA Zip Code 99301	Amount of Each Receipt this Period _____ 500.00 DONATION		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation T & R FARMS, INC CO-OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 750.00		

Full Name (Last, First, Middle Initial) C. Ms DONNA REISNER		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2014	
Mailing Address 303 7TH ST		Transaction ID : SA11AI.7438	
City ANACORTES State WA Zip Code 98221	Amount of Each Receipt this Period _____ 1000.00 DONATION		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation NONE RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 2000.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
REPUBLICAN LIBERTY CAUCUS PAC

Mailing Address 3734 43RD ST, #6

City SAN DIEGO State CA Zip Code 92105

FEC ID number of contributing federal political committee. **C** C00269241

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
 09 / 26 / 2014

Transaction ID : SA11AI.8209

Amount of Each Receipt this Period
 1000.00

DONATION

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

Mailing Address 4236 140TH AVE NE

City BELLEVUE State WA Zip Code 98005

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 22 / 2014

Transaction ID : SA11AI.6479

Amount of Each Receipt this Period
 250.00

DONATION

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

Mailing Address 4236 140TH AVE NE

City BELLEVUE State WA Zip Code 98005

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

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

Transaction ID : SA11AI.8175

Amount of Each Receipt this Period
 250.00

DONATION

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 55 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RON ASMUS HOMES INC

Mailing Address 2810 W CLEARWATER AVE, STE 102

City State Zip Code
KENNEWICK WA 99336

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

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
 09 30 2014

Transaction ID : SA11AI.8185

Amount of Each Receipt this Period
 2500.00
 DONATION - REIMB 4TH QTR

B. Full Name (Last, First, Middle Initial)
Mr. CHARLES ROWE

Mailing Address 4319 S HELENA ST

City State Zip Code
SPOKANE WA 99203

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 01 2014

Transaction ID : SA11AI.7192

Amount of Each Receipt this Period
 100.00
 DONATION

C. Full Name (Last, First, Middle Initial)
SALT INSTITUTE

Mailing Address PO BOX 117

City State Zip Code
NORTHPORT WA 99157

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

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
 08 18 2014

Transaction ID : SA11AI.6881

Amount of Each Receipt this Period
 500.00
 DONATION - REIMB 4TH QTR

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

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

3100.00

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

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

FOR LINE NUMBER: PAGE 56 OF 103
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SARHPAC

Mailing Address **PO BOX 7711**

City **ARLINGTON** State **VA** Zip Code **22207**

FEC ID number of contributing federal political committee. **C C00458588**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 18 / 2014

Transaction ID : SA11AI.6890

Amount of Each Receipt this Period
5000.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. CHARLES SCHEEL

Mailing Address **6354 CHINOOK DR**

City **CLINTON** State **WA** Zip Code **98236**

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
09 / 01 / 2014

Transaction ID : SA11AI.7326

Amount of Each Receipt this Period
500.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms FRANCES SCHEEL

Mailing Address **61354 CHINOOK DR**

City **CLINTON** State **WA** Zip Code **98236**

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
09 / 01 / 2014

Transaction ID : SA11AI.7328

Amount of Each Receipt this Period
500.00

DONATION

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 57 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms GRETCHEN SCHREINER

Mailing Address 11701 RD 170

City State Zip Code
BASIN CITY WA 99343

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

Name of Employer Occupation
GRETCHEN SCHREINER TRANSPORT OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 24 2014

Transaction ID : SA11AI.6490

Amount of Each Receipt this Period
500.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. ROY SIMPERMAN

Mailing Address 5609 80TH AVE SE

City State Zip Code
MERCER ISLAND WA 98040

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

Name of Employer Occupation
SIMPERMAN-CORETTE FOUNDATION CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 01 2014

Transaction ID : SA11AI.7204

Amount of Each Receipt this Period
500.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms RENEE SLOCUMB

Mailing Address 2103 SUNRISE CT

City State Zip Code
WEST RICHLAND WA 99353

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

Name of Employer Occupation
BECHTEL ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 23 2014

Transaction ID : SA11AI.7922

Amount of Each Receipt this Period
300.00

DONATION

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SMI GROUP XII, LLC

Mailing Address 1030 BATTELLE BLVD, #102

City RICHLAND State WA Zip Code 99354

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

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
 09 / 15 / 2014

Transaction ID : SA11AI.7787

Amount of Each Receipt this Period
2500.00

DONATION - REIMB 4TH QTR

B. Full Name (Last, First, Middle Initial)
SMI GROUP XV, LLC

Mailing Address 1030 BATTELLE BLVD, #102

City RICHLAND State WA Zip Code 99354

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

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
 09 / 15 / 2014

Transaction ID : SA11AI.7789

Amount of Each Receipt this Period
2500.00

DONATION - REIMB 4TH QTR

C. Full Name (Last, First, Middle Initial)
STAHL HUTTERIAN BRETHERN

Mailing Address 1485 N HOFFMAN RD

City RITZVILLE State WA Zip Code 99169

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

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 Y Y
 08 / 15 / 2014

Transaction ID : SA11AI.6956

Amount of Each Receipt this Period
500.00

DONATION - REIMB 4TH QTR

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 59 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. JOHN STONE

Mailing Address 1602 S FILLMORE ST

City State Zip Code
KENNEWICK WA 99338

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

Name of Employer Occupation
FRED MEYER CLERK

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 11 2014

Transaction ID : SA11AI.6792

Amount of Each Receipt this Period
 100.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. JOHN STONE

Mailing Address 1602 S FILLMORE ST

City State Zip Code
KENNEWICK WA 99338

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

Name of Employer Occupation
FRED MEYER CLERK

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

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

Transaction ID : SA11AI.7087

Amount of Each Receipt this Period
 100.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms BARBARA STORMS

Mailing Address 8614 BELL ST

City State Zip Code
PASCO WA 99301

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
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 04 2014

Transaction ID : SA11AI.6826

Amount of Each Receipt this Period
 50.00

DONATION

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 60 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. LES STORMS

Mailing Address 8614 BELL ST

City PASCO State WA Zip Code 99301

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 02 / 2014

Transaction ID : SA11AI.7203

Amount of Each Receipt this Period
50.00

DONATION

B. Full Name (Last, First, Middle Initial)
SUPPORTING CONSERVATIVES OF TODAY & TOMORROW PAC

Mailing Address PO BOX 905

City NEWTON State NJ Zip Code 07860

FEC ID number of contributing federal political committee. **C** C00453324

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
09 / 30 / 2014

Transaction ID : SA11AI.8491

Amount of Each Receipt this Period
1000.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. CECIL SWIFT

Mailing Address 6753 E TILSTRA RD

City BENTON CITY State WA Zip Code 99320

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : SA11AI.7155

Amount of Each Receipt this Period
200.00

DONATION

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 61 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. RAWLEY TAYLOR

Mailing Address 261 LINCOLN RD

City MESA State WA Zip Code 99343

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.6969

Amount of Each Receipt this Period
500.00

DONATION

B. Full Name (Last, First, Middle Initial)
THE PACIFIC NORTHWEST PROJECT

Mailing Address 3030 W CLEARWATER AVE, STE 205-A

City KENNEWICK State WA Zip Code 99336

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

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

Transaction ID : SA11AI.7582

Amount of Each Receipt this Period
750.00

DONATION

C. Full Name (Last, First, Middle Initial)
THOMAS MASSIE FOR CONGRESS

Mailing Address PO BOX 1444

City FLORENCE State KY Zip Code 41022

FEC ID number of contributing federal political committee. **C** C00509729

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
 08 / 28 / 2014

Transaction ID : SA11AI.7481

Amount of Each Receipt this Period
2000.00

DONATION

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

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

3250.00

**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 62 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. BILL THOMPSON

Mailing Address 8213 OLYMPIC VIEW LN

City State Zip Code
CLINTON WA 98236

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

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

Transaction ID : SA11AI.7499

Amount of Each Receipt this Period
 300.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. BOB TIPPETT

Mailing Address 2716 RD 64

City State Zip Code
PASCO WA 99301

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

Name of Employer Occupation
TIPPETT COMPANY OWNEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 27 / 2014

Transaction ID : SA11AI.6934

Amount of Each Receipt this Period
 250.00

DONATION

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

Mailing Address 6001 S THORP HWY

City State Zip Code
ELLENSBURG WA 98926

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2050.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 27 / 2014

Transaction ID : SA11AI.7436

Amount of Each Receipt this Period
 375.00

DONATION

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

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

925.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

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

Mailing Address 6001 S THORP HWY

City State Zip Code
ELLENSBURG WA 98926

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2050.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 27 / 2014

Transaction ID : SA11AI.7437

Amount of Each Receipt this Period
 375.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. GILBERT TOMLINSON

Mailing Address 3682 SELPH LANDING RD

City State Zip Code
PASCO WA 99301

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.7335

Amount of Each Receipt this Period
 250.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms JEAN TOMLINSON

Mailing Address 3682 SELPH LANDING RD

City State Zip Code
PASCO WA 99301

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.7337

Amount of Each Receipt this Period
 250.00

DONATION

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

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

875.00

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

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

FOR LINE NUMBER: PAGE 64 OF 103
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. GARY TURPANJIAN

Mailing Address 580 SILVER SPUR RD

City State Zip Code
RANCHO PALOS VERDES CA 90275

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NEW SPARK HOLDINGS, INC CONTROLLER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7078

Amount of Each Receipt this Period

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. VICTOR VAN DAMME

Mailing Address 5113 PATRICIA AVE

City State Zip Code
LAS VEGAS NV 89130

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7427

Amount of Each Receipt this Period

DONATION

C. Full Name (Last, First, Middle Initial)
VETERANS VICTORY FUND

Mailing Address 29243 ST JUST DR

City State Zip Code
UNIONVILLE VA 22567

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7687

Amount of Each Receipt this Period

DONATION

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. BOBBY VICKERS

Mailing Address 6041 WINDSOR DR

City State Zip Code
FAIRWAY KS 66205

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

Name of Employer Occupation
IMA CORP PRODUCER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.6665

Amount of Each Receipt this Period
 250.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. MAURICE WHITE

Mailing Address 8509 CLARA DR

City State Zip Code
PASCO WA 99301

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
 09 / 11 / 2014

Transaction ID : SA11AI.7525

Amount of Each Receipt this Period
 1000.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. MARK WIESLER

Mailing Address 2290 KLAMATH RD

City State Zip Code
MESA WA 99343

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

Name of Employer Occupation
FLYING W FARMS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : SA11AI.8031

Amount of Each Receipt this Period
 1000.00

DONATION

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 66 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WORSHAM FARMS LLC

Mailing Address 2690 ST RT 17

City MESA State WA Zip Code 99343

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

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

Transaction ID : SA11AI.7834

Amount of Each Receipt this Period
1500.00

DONATION - REIMB 4TH QTR

B. Full Name (Last, First, Middle Initial)
YOUNG AMERICANS FOR LIBERTY PAC

Mailing Address 3030 CLARENDON BLVD, STE 200

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00508739

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

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

Transaction ID : SA11AI.6608

Amount of Each Receipt this Period
5200.00

DONATION

C. Full Name (Last, First, Middle Initial)
YOUNG AMERICANS FOR LIBERTY PAC

Mailing Address 3030 CLARENDON BLVD, STE 200

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00508739

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
 07 / 28 / 2014

Transaction ID : SA11AI.6617

Amount of Each Receipt this Period
-200.00

Redesignate: DONATION

[MEMO ITEM]

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

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

6700.00

**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 67 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
YOUNG AMERICANS FOR LIBERTY PAC

Mailing Address 3030 CLARENDON BLVD, STE 200

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00508739

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
 07 / 28 / 2014

Transaction ID : SA11AI.6618

Amount of Each Receipt this Period
 200.00

Redesignate:
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
YOUNG AMERICANS FOR LIBERTY PAC

Mailing Address 3030 CLARENDON BLVD, STE 200

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00508739

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 5310.00

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

Transaction ID : SA11AI.6827

Amount of Each Receipt this Period
 110.00

DONATION

C. Full Name (Last, First, Middle Initial)
YOUNG AMERICANS FOR LIBERTY PAC

Mailing Address 3030 CLARENDON BLVD, STE 200

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00508739

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 6742.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11AI.7489

Amount of Each Receipt this Period
 2.00

DONATION

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

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

112.00

**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 68 OF 103
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ms CYNTHIA ZAPOTOCKY		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2014	
Mailing Address PO BOX 8672		Transaction ID : SA11AI.6604	
City SPOKANE	State WA	Zip Code 99203	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1300.00	
Name of Employer NONE	Occupation HOMEMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		
		DONATION	

Full Name (Last, First, Middle Initial) B. Mr. JOHN ZAPOTOCKY		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2014	
Mailing Address PO BOX 8672		Transaction ID : SA11AI.6605	
City SPOKANE	State WA	Zip Code 99203	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1300.00	
Name of Employer PACIFIC RIM LAND INC	Occupation MANAGER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		
		DONATION	

Full Name (Last, First, Middle Initial) C. Mr. ARTHUR ZELLMER		Date of Receipt M M / D D / Y Y Y Y 09 / 02 / 2014	
Mailing Address BOX 325		Transaction ID : SA11AI.7256	
City DAVENPORT	State WA	Zip Code 99122	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 305.00		
		DONATION	

SUBTOTAL of Receipts This Page (optional).....	2725.00
TOTAL This Period (last page this line number only).....	136462.00

**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 69 OF 103		
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ACN RADIO NETWORK		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address PO BOX 31000		Amount of Each Disbursement this Period 720.00 Transaction ID : SB17.6849
City SPOKANE	State WA	
Zip Code 99223	Purpose of Disbursement JULY RADIO ADS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ACTION SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 6855 NE ARNOLD AVE		Amount of Each Disbursement this Period 1926.12 Transaction ID : SB17.6626
City ADAIR VILLAGE	State OR	
Zip Code 97330	Purpose of Disbursement ROBO CALLS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ACTION SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 6855 NE ARNOLD AVE		Amount of Each Disbursement this Period 1654.42 Transaction ID : SB17.6789
City ADAIR VILLAGE	State OR	
Zip Code 97330	Purpose of Disbursement ROBO CALLS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4300.54
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 70 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ALASKA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address PO BOX 68900		Amount of Each Disbursement this Period 563.20 Transaction ID : SB17.7380
City SEATTLE	State WA	
Zip Code 98168	Purpose of Disbursement AIRLINE TICKET	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ALLIED LAW FIRM PLLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 6951 MLK JUNIOR WAY S STE 226		Amount of Each Disbursement this Period 940.00 Transaction ID : SB17.6786
City SEATTLE	State WA	
Zip Code 98118	Purpose of Disbursement PUBLIC DISCLOSURE REQ	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 200 VESEY ST		Amount of Each Disbursement this Period 67.41 Transaction ID : SB17.7094
City NEW YORK	State NY	
Zip Code 10285	Purpose of Disbursement ONLINE FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1570.61
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 71 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ARS FRESNO TESORO		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 4804 N RD 68		Amount of Each Disbursement this Period 90.82
City PASCO State WA Zip Code 99301	Purpose of Disbursement FUEL	
Candidate Name	Category/Type	Transaction ID : SB17.7958
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ms CHARLOTTE BENJAMIN		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 10024 E HOLMAN RD		Amount of Each Disbursement this Period 1000.00
City SPOKANE VALLEY State WA Zip Code 99206	Purpose of Disbursement ACCT'NG & FILING SVCES	
Candidate Name	Category/Type	Transaction ID : SB17.6746
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) C. Ms CHARLOTTE BENJAMIN		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 10024 E HOLMAN RD		Amount of Each Disbursement this Period 2000.00
City SPOKANE VALLEY State WA Zip Code 99206	Purpose of Disbursement ACCT'NG & FILING SVCES	
Candidate Name	Category/Type	Transaction ID : SB17.7371
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3090.82
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 72 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CHEVRON RITZVILLE			Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014	
Mailing Address 101 W GALBREATH WAY			Amount of Each Disbursement this Period 87.31	
City RITZVILLE	State WA	Zip Code 99169	Transaction ID : SB17.6916	
Purpose of Disbursement FUEL		Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) B. CHEVRON RITZVILLE			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014	
Mailing Address 101 W GALBREATH WAY			Amount of Each Disbursement this Period 91.09	
City RITZVILLE	State WA	Zip Code 99169	Transaction ID : SB17.6948	
Purpose of Disbursement FUEL		Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) C. CMDI			Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014	
Mailing Address 1593 SPRING HILL RD STE 400			Amount of Each Disbursement this Period 288.38	
City TYSONS CORNER	State VA	Zip Code 22182	Transaction ID : SB17.6622	
Purpose of Disbursement MAIL & INVOICES		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:				

SUBTOTAL of Disbursements This Page (optional).....	466.78
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 73 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 420.09 Transaction ID : SB17.6918
City TYSONS CORNER	State VA Zip Code 22182	
Purpose of Disbursement MAIL & INVOICES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 24.13 Transaction ID : SB17.7383
City TYSONS CORNER	State VA Zip Code 22182	
Purpose of Disbursement MAIL & INVOICES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. CMDI		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 379.72 Transaction ID : SB17.7507
City TYSONS CORNER	State VA Zip Code 22182	
Purpose of Disbursement MAIL & INVOICES	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	823.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 110.63 Transaction ID : SB17.7730
City TYSONS CORNER	State VA Zip Code 22182	
Purpose of Disbursement MAIL & INVOICES	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 136.11 Transaction ID : SB17.7957
City TYSONS CORNER	State VA Zip Code 22182	
Purpose of Disbursement MAIL & INVOICES	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CONSTANT CONTACT		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 1601 TRAPELO RD, RESERVOIR RD		Amount of Each Disbursement this Period 86.88 Transaction ID : SB17.6805
City WALTHAM	State MA Zip Code 02451	
Purpose of Disbursement ONLINE MARKETING	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	333.62
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 75 OF 103	
	<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)
CLINT DIDIER FOR CONGRESS

A. CONSTANT CONTACT

Full Name (Last, First, Middle Initial)
Mailing Address 1601 TRAPELO RD, RESERVOIR RD

City WALTHAM State MA Zip Code 02451

Purpose of Disbursement ONLINE MARKETING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 11 / 2014

Amount of Each Disbursement this Period: 119.46

Transaction ID : SB17.7509

B. DESERT WINDS WIRELESS

Full Name (Last, First, Middle Initial)
Mailing Address 6855 W CLEARWATER AVE, A101-104

City KENNEWICK State WA Zip Code 99336

Purpose of Disbursement CELL PHONE SVCE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 03 / 2014

Amount of Each Disbursement this Period: 180.00

Transaction ID : SB17.7076

C. JUSTIN DIDIER

Full Name (Last, First, Middle Initial)
Mailing Address 8770 GLADE RD N

City PASCO State WA Zip Code 99301

Purpose of Disbursement REIMB FOR AIRLINE TICKET

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 19 / 2014

Amount of Each Disbursement this Period: 1510.00

Transaction ID : SB17.7902

SUBTOTAL of Disbursements This Page (optional) 1809.46

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 76 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DIDIER FARMS, LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 444 HOLY DR			Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6510
City ELTOPIA	State WA	Zip Code 99330	
Purpose of Disbursement REIMB FM 1ST QTR		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. DIRECT MAIL ENTERPRISES INC			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 812 N NAPA			Amount of Each Disbursement this Period 33509.96 Transaction ID : SB17.6625
City SPOKANE	State WA	Zip Code 99202	
Purpose of Disbursement MAILERS		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. DIRECT MAIL ENTERPRISES INC			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 812 N NAPA			Amount of Each Disbursement this Period 484.99 Transaction ID : SB17.6785
City SPOKANE	State WA	Zip Code 99202	
Purpose of Disbursement TAX ON INVOICE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	34094.95
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 77 OF 103		
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DIRECT MAIL ENTERPRISES INC		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address 812 N NAPA		Amount of Each Disbursement this Period 26236.06 Transaction ID : SB17.6852
City SPOKANE	State WA	
Zip Code 99202	Purpose of Disbursement MAILERS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. DIRECT MAIL ENTERPRISES INC		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 812 N NAPA		Amount of Each Disbursement this Period 5372.92 Transaction ID : SB17.7360
City SPOKANE	State WA	
Zip Code 99202	Purpose of Disbursement MAILERS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. DIRECT MAIL ENTERPRISES INC		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 812 N NAPA		Amount of Each Disbursement this Period 798.25 Transaction ID : SB17.7361
City SPOKANE	State WA	
Zip Code 99202	Purpose of Disbursement MAILERS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	32407.23
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 78 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

A. DIRECT MAIL ENTERPRISES INC

Full Name (Last, First, Middle Initial)
Mailing Address 812 N NAPA

City SPOKANE State WA Zip Code 99202

Purpose of Disbursement MAILERS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 29 / 2014

Amount of Each Disbursement this Period: 536.82

Transaction ID : SB17.8085

B. Mr. DAVID FERMAN

Full Name (Last, First, Middle Initial)
Mailing Address 2104 E PHINNEY BAY DR

City BREMERTON State WA Zip Code 98312

Purpose of Disbursement AUG & SEP SIGN PLACEMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 02 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.7073

C. FRANKLIN COUNTY REPUBLICAN CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 4390

City PASCO State WA Zip Code 99302

Purpose of Disbursement REIMB - OVER LIMIT DONATION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 25 / 2014

Amount of Each Disbursement this Period: 400.00

Transaction ID : SB17.6535

SUBTOTAL of Disbursements This Page (optional) 1936.82

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 79 OF 103	
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRANKLIN COUNTY REPUBLICAN CENTRAL COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address PO BOX 4390		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB17.7364
City PASCO State WA Zip Code 99302	Purpose of Disbursement REIMB TO NON-REG'ED COMMITTEE DONATION	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. HEINEN BROTHERS, INC		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 13218 HWY 396		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.6588
City ELTOPIA State WA Zip Code 99330	Purpose of Disbursement REIMB FM 1ST QTR	
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) C. IRONWOOD ACRES		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 250 IRONWOOD RD		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.6895
City ELTOPIA State WA Zip Code 99330	Purpose of Disbursement REIMB FM 2ND QTR	
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:		

SUBTOTAL of Disbursements This Page (optional).....	5350.00
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 80 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. L2, INC		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 2500 116TH AVE NE		Amount of Each Disbursement this Period 778.55
City BELLEVUE State WA Zip Code 98004	Category/Type	
Purpose of Disbursement MAILING LISTS	Candidate Name	Transaction ID : SB17.8116
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. LITTLE BONANZA PRODUCTIONS, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 33301 AGUA DULCE CANYON RD PMB#2		Amount of Each Disbursement this Period 5000.00
City AGUA DULCE State CA Zip Code 91390	Category/Type	
Purpose of Disbursement VIDEO	Candidate Name	Transaction ID : SB17.7512
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. LITTLE BONANZA PRODUCTIONS, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 33301 AGUA DULCE CANYON RD PMB#2		Amount of Each Disbursement this Period 5000.00
City AGUA DULCE State CA Zip Code 91390	Category/Type	
Purpose of Disbursement CAMPAIGN VIDEO	Candidate Name	Transaction ID : SB17.7899
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10778.55
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 81 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LOWE'S HOME IMPROVEMENT		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 4520 ROAD 68		Amount of Each Disbursement this Period 50.78
City PASCO State WA Zip Code 99301	Purpose of Disbursement SIGN MATERIALS	
Candidate Name		Transaction ID : SB17.6533
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. LOWE'S HOME IMPROVEMENT		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 4520 ROAD 68		Amount of Each Disbursement this Period 137.09
City PASCO State WA Zip Code 99301	Purpose of Disbursement SIGNAGE	
Candidate Name		Transaction ID : SB17.6873
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. LOWE'S HOME IMPROVEMENT		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 4520 ROAD 68		Amount of Each Disbursement this Period 366.73
City PASCO State WA Zip Code 99301	Purpose of Disbursement SIGN MATERIALS	
Candidate Name		Transaction ID : SB17.7515
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	554.60
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 82 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MERCHANT E-SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 3600 BRIDGE PKWY STE 102		Amount of Each Disbursement this Period 369.58
City REDWOOD CITY	State CA Zip Code 94065	
Purpose of Disbursement ONLINE FEES	Category/Type	Transaction ID : SB17.6771
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MERCHANT E-SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 3600 BRIDGE PKWY STE 102		Amount of Each Disbursement this Period 225.00
City REDWOOD CITY	State CA Zip Code 94065	
Purpose of Disbursement ONLINE FEES	Category/Type	Transaction ID : SB17.6772
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MERCHANT E-SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 3600 BRIDGE PKWY STE 102		Amount of Each Disbursement this Period 472.44
City REDWOOD CITY	State CA Zip Code 94065	
Purpose of Disbursement ONLINE FEES	Category/Type	Transaction ID : SB17.7077
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1067.02
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 83 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR QWIK'S COUNTRY, INC		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address PO BOX 8		Amount of Each Disbursement this Period 72.53 Transaction ID : SB17.6456
City ELTOPIA State WA Zip Code 99330	Purpose of Disbursement FUEL	
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. MR QWIK'S COUNTRY, INC		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address PO BOX 8		Amount of Each Disbursement this Period 50.02 Transaction ID : SB17.6581
City ELTOPIA State WA Zip Code 99330	Purpose of Disbursement FUEL	
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) C. MR QWIK'S COUNTRY, INC		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address PO BOX 8		Amount of Each Disbursement this Period 94.07 Transaction ID : SB17.6582
City ELTOPIA State WA Zip Code 99330	Purpose of Disbursement FUEL	
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:		

SUBTOTAL of Disbursements This Page (optional).....	216.62
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 84 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR QWIK'S COUNTRY, INC			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014	
Mailing Address PO BOX 8			Amount of Each Disbursement this Period 60.87	
City ELTOPIA	State WA	Zip Code 99330	Transaction ID : SB17.6725	
Purpose of Disbursement FUEL	Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State: District:				

Full Name (Last, First, Middle Initial) B. MR QWIK'S COUNTRY, INC			Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014	
Mailing Address PO BOX 8			Amount of Each Disbursement this Period 72.79	
City ELTOPIA	State WA	Zip Code 99330	Transaction ID : SB17.6743	
Purpose of Disbursement FUEL	Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State: District:				

Full Name (Last, First, Middle Initial) C. MR QWIK'S COUNTRY, INC			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014	
Mailing Address PO BOX 8			Amount of Each Disbursement this Period 74.43	
City ELTOPIA	State WA	Zip Code 99330	Transaction ID : SB17.6855	
Purpose of Disbursement FUEL	Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	208.09
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 85 OF 103		
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR QWIK'S COUNTRY, INC		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address PO BOX 8		Amount of Each Disbursement this Period 96.34 Transaction ID : SB17.6900
City ELTOPIA State WA Zip Code 99330	Purpose of Disbursement FUEL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MR QWIK'S COUNTRY, INC		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address PO BOX 8		Amount of Each Disbursement this Period 55.29 Transaction ID : SB17.6901
City ELTOPIA State WA Zip Code 99330	Purpose of Disbursement FUEL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MR QWIK'S COUNTRY, INC		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014
Mailing Address PO BOX 8		Amount of Each Disbursement this Period 40.00 Transaction ID : SB17.6908
City ELTOPIA State WA Zip Code 99330	Purpose of Disbursement FUEL	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	191.63
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 86 OF 103	
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR QWIK'S COUNTRY, INC		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address PO BOX 8		Amount of Each Disbursement this Period 37.33
City ELTOPIA	State WA Zip Code 99330	
Purpose of Disbursement FUEL	Category/Type	Transaction ID : SB17.7376
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MR QWIK'S COUNTRY, INC		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address PO BOX 8		Amount of Each Disbursement this Period 89.03
City ELTOPIA	State WA Zip Code 99330	
Purpose of Disbursement FUEL	Category/Type	Transaction ID : SB17.7640
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NATIONAL COLOR GRAPHICS INC		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 25 W BOONE		Amount of Each Disbursement this Period 18218.52
City SPOKANE	State WA Zip Code 99201	
Purpose of Disbursement FUNDRAISING MATERIALS	Category/Type	Transaction ID : SB17.6580
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	18344.88
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 87 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NATIONAL COLOR GRAPHICS INC		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 25 W BOONE		Amount of Each Disbursement this Period 511.45 Transaction ID : SB17.6721
City SPOKANE	State WA	
Zip Code 99201	Purpose of Disbursement FUNDRAISING MATERIALS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. NATIONAL COLOR GRAPHICS INC		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 25 W BOONE		Amount of Each Disbursement this Period 177.18 Transaction ID : SB17.6779
City SPOKANE	State WA	
Zip Code 99201	Purpose of Disbursement FUNDRAISING MATERIALS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. NATIONAL COLOR GRAPHICS INC		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 25 W BOONE		Amount of Each Disbursement this Period 9709.08 Transaction ID : SB17.6813
City SPOKANE	State WA	
Zip Code 99201	Purpose of Disbursement FUNDRAISING MATERIAL & PRINTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	10397.71
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 88 OF 103	
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NATIONAL COLOR GRAPHICS INC		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 25 W BOONE		Amount of Each Disbursement this Period 5379.55 Transaction ID : SB17.7368
City SPOKANE State WA Zip Code 99201	Purpose of Disbursement FUNDRAISING MATERIALS & PRINTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. NATIONAL COLOR GRAPHICS INC		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 25 W BOONE		Amount of Each Disbursement this Period 281.53 Transaction ID : SB17.7373
City SPOKANE State WA Zip Code 99201	Purpose of Disbursement PRINTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NOW AMFOUND GEOGRAPHICS LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address PO BOX 2906		Amount of Each Disbursement this Period 312.00 Transaction ID : SB17.6740
City KIRKLAND State WA Zip Code 98083	Purpose of Disbursement PRECINCT ANALYSIS & DOORBELLING MAPS	
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:		

SUBTOTAL of Disbursements This Page (optional).....	5973.08
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NOW AMFOUND GEOGRAPHICS LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address PO BOX 2906		Amount of Each Disbursement this Period 310.00 Transaction ID : SB17.6810
City KIRKLAND	State WA	
Zip Code 98083	Purpose of Disbursement PRECINCT ANALYSIS & DOORBELLING MAPS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 6815 W CANAL DR		Amount of Each Disbursement this Period 72.11 Transaction ID : SB17.6476
City KENNEWICK	State WA	
Zip Code 99336	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 6815 W CANAL DR		Amount of Each Disbursement this Period 317.61 Transaction ID : SB17.7514
City KENNEWICK	State WA	
Zip Code 99336	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	699.72
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 103		
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OMNI SHOREHAM HOTEL		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 2500 CALVERT ST		Amount of Each Disbursement this Period 978.62 Transaction ID : SB17.8064
City WASHINGTON	State DC	
Zip Code 20008	Purpose of Disbursement ACCOMMODATIONS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PARR LUMBER CO		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 2105 N COMMERCIAL AVE		Amount of Each Disbursement this Period 236.75 Transaction ID : SB17.6536
City PASCO	State WA	
Zip Code 99301	Purpose of Disbursement SIGN MATERIALS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PARR LUMBER CO		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 2105 N COMMERCIAL AVE		Amount of Each Disbursement this Period 377.39 Transaction ID : SB17.6874
City PASCO	State WA	
Zip Code 99301	Purpose of Disbursement SIGNAGE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1592.76
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 91 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. STEPHEN PIDGEON			Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014	
Mailing Address 3002 COLBY AVE, STE 306			Amount of Each Disbursement this Period 500.00	
City EVERETT	State WA	Zip Code 98201	Transaction ID : SB17.6781	
Purpose of Disbursement LEGAL CONSULTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Mr. STEPHEN PIDGEON			Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014	
Mailing Address 3002 COLBY AVE, STE 306			Amount of Each Disbursement this Period 2500.00	
City EVERETT	State WA	Zip Code 98201	Transaction ID : SB17.7734	
Purpose of Disbursement LEGAL CONSULTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Mr. SAM PIMM			Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014	
Mailing Address 1155 15th St NW			Amount of Each Disbursement this Period 2500.00	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SB17.7731	
Purpose of Disbursement CAMPAIGN FUNDRAISING OUT OF STATE		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	5500.00
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 92 OF 103	
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PRESSCATS.COM		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 18219 N LIDGERWOOD		Amount of Each Disbursement this Period 890.87 Transaction ID : SB17.6894
City COLBERT State WA Zip Code 99005	Purpose of Disbursement SIGNS	
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. PRESSCATS.COM		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 18219 N LIDGERWOOD		Amount of Each Disbursement this Period 5350.59 Transaction ID : SB17.7075
City COLBERT State WA Zip Code 99005	Purpose of Disbursement MAILER	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Mr. DOUGLAS SIMPSON		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 6010 WYNN JONES RD E		Amount of Each Disbursement this Period 15000.00 Transaction ID : SB17.6733
City PORT ORCHARD State WA Zip Code 98366	Purpose of Disbursement GENERAL CAMPAIGN CONSULTING	
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:		

SUBTOTAL of Disbursements This Page (optional).....	21241.46
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 103	
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. DOUGLAS SIMPSON		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 6010 WYNN JONES RD E		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.7370
City PORT ORCHARD	State WA	
Zip Code 98366	Purpose of Disbursement GENERAL CAMPAIGN CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Mr. DOUGLAS SIMPSON		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 6010 WYNN JONES RD E		Amount of Each Disbursement this Period 7435.32 Transaction ID : SB17.8046
City PORT ORCHARD	State WA	
Zip Code 98366	Purpose of Disbursement REIMB FOR MEDIA ADS	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Mr. LARRY STICKNEY		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 978 WESTOVER RD		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.6722
City COLVILLE	State WA	
Zip Code 99114	Purpose of Disbursement CAMPAIGN MANAGERIAL FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	17435.32
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 94 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. LARRY STICKNEY			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014	
Mailing Address 978 WESTOVER RD			Amount of Each Disbursement this Period 5000.00	
City COLVILLE	State WA	Zip Code 99114	Transaction ID : SB17.7069	
Purpose of Disbursement CAMPAIGN MANAGERIAL FEE		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. T-SHIRT FACTORY			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 1625 W A ST			Amount of Each Disbursement this Period 445.26	
City PASCO	State WA	Zip Code 99301	Transaction ID : SB17.7638	
Purpose of Disbursement TEES FOR ADVERTISING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. THE SOURCE			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014	
Mailing Address 575 PENNSYLVANIA AVE NW			Amount of Each Disbursement this Period 1103.30	
City WASHINGTON	State DC	Zip Code 20565	Transaction ID : SB17.8070	
Purpose of Disbursement CONSUMABLES		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	6548.56
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 95 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US POST OFFICE		Date of Disbursement
Mailing Address 13101 GLADE N RD		M M / D D / Y Y Y Y 07 / 22 / 2014
City ELTOPIA	State WA	Zip Code 99330
Purpose of Disbursement MAILINGS	Amount of Each Disbursement this Period 5.75	
Candidate Name	Transaction ID : SB17.6507	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. US POST OFFICE		Date of Disbursement
Mailing Address 13101 GLADE N RD		M M / D D / Y Y Y Y 07 / 24 / 2014
City ELTOPIA	State WA	Zip Code 99330
Purpose of Disbursement MAILINGS	Amount of Each Disbursement this Period 152.75	
Candidate Name	Transaction ID : SB17.6534	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) C. US POST OFFICE		Date of Disbursement
Mailing Address 13101 GLADE N RD		M M / D D / Y Y Y Y 08 / 25 / 2014
City ELTOPIA	State WA	Zip Code 99330
Purpose of Disbursement MAILINGS	Amount of Each Disbursement this Period 23.55	
Candidate Name	Transaction ID : SB17.6913	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional).....	182.05
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 96 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US POST OFFICE		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address 13101 GLADE N RD		Amount of Each Disbursement this Period 1.19 Transaction ID : SB17.6945
City ELTOPIA State WA Zip Code 99330	Purpose of Disbursement MAILING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. US POST OFFICE		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 13101 GLADE N RD		Amount of Each Disbursement this Period 199.92 Transaction ID : SB17.7901
City ELTOPIA State WA Zip Code 99330	Purpose of Disbursement MAILING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2014
Mailing Address PO BOX 4005		Amount of Each Disbursement this Period 327.72 Transaction ID : SB17.6875
City ACTON State GA Zip Code 30101	Purpose of Disbursement CELL PHONE SVCE	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	528.83
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 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address PO BOX 4005		Amount of Each Disbursement this Period 305.32
City ACTON	State GA	
Zip Code 30101	Purpose of Disbursement WIRELESS SVCE	Transaction ID : SB17.8048
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. VOSSLER MEDIA GROUP		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 11730 118th Ave NE		Amount of Each Disbursement this Period 2190.00
City KIRKLAND	State WA	
Zip Code 98034	Purpose of Disbursement WEBSITE	Transaction ID : SB17.8087
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. WALMART SUPERCENTER		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 4820 N RD 68		Amount of Each Disbursement this Period 120.32
City PASCO	State WA	
Zip Code 99301	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.6517
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:		

SUBTOTAL of Disbursements This Page (optional).....	2615.64
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 98 OF 103			
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WALMART SUPERCENTER		Date of Disbursement
Mailing Address 4820 N RD 68		M M / D D / Y Y Y Y 07 / 30 / 2014
City PASCO	State WA	Zip Code 99301
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Amount of Each Disbursement this Period 183.90
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:	Transaction ID : SB17.6661

Full Name (Last, First, Middle Initial) B. WALMART SUPERCENTER		Date of Disbursement
Mailing Address 4820 N RD 68		M M / D D / Y Y Y Y 08 / 13 / 2014
City PASCO	State WA	Zip Code 99301
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Amount of Each Disbursement this Period 4.36
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : SB17.6815

Full Name (Last, First, Middle Initial) C. WALMART SUPERCENTER		Date of Disbursement
Mailing Address 4820 N RD 68		M M / D D / Y Y Y Y 08 / 13 / 2014
City PASCO	State WA	Zip Code 99301
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Amount of Each Disbursement this Period 150.02
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Transaction ID : SB17.6816

SUBTOTAL of Disbursements This Page (optional).....	338.28
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 99 OF 103	
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WALMART SUPERCENTER		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2014
Mailing Address 4820 N RD 68		Amount of Each Disbursement this Period 147.00 Transaction ID : SB17.6876
City PASCO State WA Zip Code 99301	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. WALMART SUPERCENTER		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2014
Mailing Address 4820 N RD 68		Amount of Each Disbursement this Period 28.69 Transaction ID : SB17.6877
City PASCO State WA Zip Code 99301	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. WALMART SUPERCENTER		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 4820 N RD 68		Amount of Each Disbursement this Period 200.58 Transaction ID : SB17.6899
City PASCO State WA Zip Code 99301	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	376.27
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 100 OF 103	
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WALMART SUPERCENTER		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 4820 N RD 68		Amount of Each Disbursement this Period 131.51 Transaction ID : SB17.7379
City PASCO State WA Zip Code 99301	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. WALMART SUPERCENTER		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 4820 N RD 68		Amount of Each Disbursement this Period 164.40 Transaction ID : SB17.7955
City PASCO State WA Zip Code 99301	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. WALMART SUPERCENTER		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 4820 N RD 68		Amount of Each Disbursement this Period 291.05 Transaction ID : SB17.8088
City PASCO State WA Zip Code 99301	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	586.96
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 101 OF 103	
	<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)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. DERRAL WHITE			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014	
Mailing Address 2146 HERITAGE WAY			Amount of Each Disbursement this Period 539.40	
City ADDY	State WA	Zip Code 99101	Transaction ID : SB17.6812	
Purpose of Disbursement SIGNAGE & FUEL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		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) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		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:				

SUBTOTAL of Disbursements This Page (optional).....	539.40
TOTAL This Period (last page this line number only).....	192102.20

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **CLINT DIDIER FOR CONGRESS** Transaction ID : **SC/10.4244**

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

City	State	ZIP Code
ELTOPIA	WA	99301

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

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
02 / 25 / 2014	/ / 0	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	▶	10000.00
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **CLINT DIDIER FOR CONGRESS** Transaction ID : **SC/10.4245**

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

City	State	ZIP Code
ELTOPIA	WA	99301

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

TERMS

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

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

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

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

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