

# 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

BOB DINGETHAL FOR CONGRESS

ADDRESS (number and street) ▼

PO Box 668

Check if different than previously reported. (ACC)

Vancouver

WA

98666

2. **FEC IDENTIFICATION NUMBER** ▼

C C00553818

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

WA

03

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

08

05

2014

in the State of

WA

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

07

01

2014

through

07

16

2014

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

Type or Print Name of Treasurer Marsha Manning

Signature of Treasurer Marsha Manning

[Electronically Filed]

Date

07

23

2014

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**BOB DINGETHAL FOR CONGRESS**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 07 / 16 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	6652.96	100917.43
(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)).....	6652.96	100917.43
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	9112.53	83382.26
(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)).....	9112.53	83382.26
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	19911.12	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	2375.95	

**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

**BOB DINGETHAL FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5517.96	74659.15
(ii) Unitemized.....	1135.00	26077.61
(iii) TOTAL of contributions from individuals ▶	6652.96	100736.76
(b) Political Party Committees.....	0.00	130.67
(c) Other Political Committees (such as PACs).....	0.00	50.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	6652.96	100917.43
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	2375.95
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	2375.95
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	6652.96	103293.38

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	9112.53	83382.26
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	9112.53	83382.26

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	22370.69
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6652.96
25. SUBTOTAL (add Line 23 and Line 24).....	29023.65
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	9112.53
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	19911.12

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Norman Banks**

Mailing Address 12214 NW 21st Ave

City Vancouver State WA Zip Code 98685

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 M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2014

**Transaction ID : SA11AI.5897**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 6837 SE 36th Ave

City Portland State OR Zip Code 97202

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

Name of Employer NW Cancer Specialists Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 13 / 2014

**Transaction ID : SA11AI.5918**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 17811 NW 56TH AVE

City RIDGEFIELD State WA Zip Code 98642

FEC ID number of contributing federal political committee. **C** H4WA03114

Name of Employer Gifford Pinchot Task Force Occupation Executive Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5978.57

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 16 / 2014

**Transaction ID : SA11AI.5938**

Amount of Each Receipt this Period  
117.96  
In-kind - Misc food and travel

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

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

567.96

**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 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Fred Meyer - Tenney Rd**

Mailing Address 800 NE Tenney Rd

City Vancouver State WA Zip Code 98685

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 05 / 2014

**Transaction ID : SA11AI.5942**

Amount of Each Receipt this Period  
 4.99

In-kind - Dingethal personal exp

**[MEMO ITEM]**

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

Mailing Address 1708 NW Gregory Dr

City Vancouver State WA Zip Code 98665

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

Name of Employer Occupation  
 Omega Industries Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2014

**Transaction ID : SA11AI.5928**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1708 NW Gregory Dr

City Vancouver State WA Zip Code 98665-6004

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

Name of Employer Occupation  
 Maria's Properties Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 1600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2014

**Transaction ID : SA11AI.5929**

Amount of Each Receipt this Period  
 500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Gotta Hava Java**

Mailing Address 371 SW Hwy 14

City Stevenson State WA Zip Code 98648

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 14 / 2014

**Transaction ID : SA11AI.5948**

Amount of Each Receipt this Period  
 5.71

In-kind -

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**Higgins Restaurant & Bar**

Mailing Address 1239 SW Broadway

City Portland State OR Zip Code 97205

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 11 / 2014

**Transaction ID : SA11AI.5946**

Amount of Each Receipt this Period  
 42.75

In-kind - Dingethal personal exp

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**Labroers' Political League Seattle**

Mailing Address 905 16th St NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 14 / 2014

**Transaction ID : SA11AI.5925**

Amount of Each Receipt this Period  
 2500.00

**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 8 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Norma's Kitchen**

Mailing Address 12010 N Jantzen Dr

City Portland State OR Zip Code 97217

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 03 / 2014

**Transaction ID : SA11AI.5940**

Amount of Each Receipt this Period  
 25.00

In-kind - Dingethal personal exp

**[MEMO ITEM]**

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

Mailing Address 17700 NW 56th Ave

City Ridgefield State WA Zip Code 98642

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  
527.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2014

**Transaction ID : SA11AI.5930**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Plumbing & Pipefitting Industry**

Mailing Address 20210 SW Teton Ave

City Tualatin State OR Zip Code 97062

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
950.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 09 / 2014

**Transaction ID : SA11AI.5908**

Amount of Each Receipt this Period  
 950.00

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

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

1450.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

**A. SmartPark**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 720 NW Lovejoy Ct  
 City Portland State OR Zip Code 97201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 11 / 2014  
**Transaction ID : SA11AI.5950**  
 Amount of Each Receipt this Period  
 3.40  
 In-kind - Dingethal personal exp  
**[MEMO ITEM]**

**B. Starbucks**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7720 NE Hwy 99  
 City Vancouver State WA Zip Code 98665  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 01 / 2014  
**Transaction ID : SA11AI.5939**  
 Amount of Each Receipt this Period  
 9.11  
 In-kind - Dingethal personal exp  
**[MEMO ITEM]**

**C. Thai Orchid**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1004 Washington St  
 City Vancouver State WA Zip Code 98660  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 07 / 2014  
**Transaction ID : SA11AI.5944**  
 Amount of Each Receipt this Period  
 27.00  
 In-kind - Dingethal personal exp  
**[MEMO ITEM]**

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

0.00  
 5517.96

**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 10 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Cash &amp; Carry</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 10611 NE 53rd St		Amount of Each Disbursement this Period 224.27
City Vancouver	State WA	
Zip Code 98662	Purpose of Disbursement Parade candy	Transaction ID : SB17.5869
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Category/ Type 007	
Office Sought: <input checked="" 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: WA District: 03		

Full Name (Last, First, Middle Initial) <b>B. Clark Public Utilities</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2014
Mailing Address PO Box 8989		Amount of Each Disbursement this Period 121.61
City Vancouver	State WA	
Zip Code 98668	Purpose of Disbursement Utilities for office - Electric	Transaction ID : SB17.5885
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Category/ Type 001	
Office Sought: <input checked="" 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: WA District: 03		

Full Name (Last, First, Middle Initial) <b>c. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address PO Box 34227		Amount of Each Disbursement this Period 173.24
City Seattle	State WA	
Zip Code 98124	Purpose of Disbursement Internet service	Transaction ID : SB17.5862
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Category/ Type 001	
Office Sought: <input checked="" 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: WA District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	519.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Tom Desmond</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 10506 NE 37th Ave		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB17.5867</b>
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement Staff	Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" 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: WA District: 03	

Full Name (Last, First, Middle Initial) <b>B. Tom Desmond</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 10506 NE 37th Ave		Amount of Each Disbursement this Period 44.55 <b>Transaction ID : SB17.5879</b>
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement Mileage reimbursement	Category/ Type 002
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" 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: WA District: 03	

Full Name (Last, First, Middle Initial) <b>C. BOB E DINGETHAL</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 17811 NW 56TH AVE		Amount of Each Disbursement this Period 700.70 <b>Transaction ID : SB17.5877</b>
City RIDGEFIELD	State WA	
Zip Code 98642	Purpose of Disbursement Mileage reimbursement	Category/ Type 002
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" 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: WA District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1245.25
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. BOB E DINGETHAL</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 17811 NW 56TH AVE		Amount of Each Disbursement this Period 117.96
City RIDGEFIELD	State WA	
Zip Code 98642	Purpose of Disbursement In-kind - Misc food and travel	Transaction ID : SB17.5958
Candidate Name	Category/Type	
Office Sought: <input checked="" 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: WA	District: 03	

Full Name (Last, First, Middle Initial) <b>B. Fred Meyer - Tenney Rd</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2014
Mailing Address 800 NE Tenney Rd		Amount of Each Disbursement this Period 4.99
City Vancouver	State WA	
Zip Code 98685	Purpose of Disbursement In-kind - Dingethal personal exp	Transaction ID : SB17.5955
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)	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Gotta Hava Java</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 371 SW Hwy 14		Amount of Each Disbursement this Period 5.71
City Stevenson	State WA	
Zip Code 98648	Purpose of Disbursement In-kind -	Transaction ID : SB17.5952
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)	[MEMO ITEM]
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	117.96
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Peter Harrison</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 10006 NE 36th Ct		Amount of Each Disbursement this Period 7,500.00 53.76 <b>Transaction ID : SB17.5886</b>
City Vancouver State WA Zip Code 98686	Purpose of Disbursement Reimburse web name auction 001 Category/Type	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03		

Full Name (Last, First, Middle Initial) <b>B. Higgins Restaurant &amp; Bar</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 1239 SW Broadway		Amount of Each Disbursement this Period 7,500.00 42.75 <b>Transaction ID : SB17.5953</b> <b>[MEMO ITEM]</b>
City Portland State OR Zip Code 97205	Purpose of Disbursement In-kind - Dingethal personal exp Category/Type	
Candidate Name		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) <b>c. Home Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 8601 NE Andresen Rd		Amount of Each Disbursement this Period 7,500.00 21.29 <b>Transaction ID : SB17.5888</b>
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Sign erection materials 001 Category/Type	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	75.05
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 23		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MailChimp</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2014
Mailing Address 512 Means St, Ste 404		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : SB17.5887</b>
City Atlanta State GA Zip Code 30318	Purpose of Disbursement Internet software 001 Category/Type	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" 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: WA District: 03		

Full Name (Last, First, Middle Initial) <b>B. Markon!</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 12209-A NE Fourth Plain Rd		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.5866</b>
City Vancouver State WA Zip Code 98682	Purpose of Disbursement Signs - deposit 001 Category/Type	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" 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: WA District: 03		

Full Name (Last, First, Middle Initial) <b>c. Markon!</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 12209-A NE Fourth Plain Rd		Amount of Each Disbursement this Period 1162.58 <b>Transaction ID : SB17.5881</b>
City Vancouver State WA Zip Code 98682	Purpose of Disbursement Signs 004 Category/Type	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" 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: WA District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2212.58
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 23			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Norma's Kitchen</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 12010 N Jantzen Dr		Amount of Each Disbursement this Period 25.00
City Portland	State OR	
Zip Code 97217	Purpose of Disbursement In-kind - Dingethal personal exp	Transaction ID : SB17.5956
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 115.33
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Postage & paper	Transaction ID : SB17.5874
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Category/Type 001	
Office Sought: <input checked="" 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: WA District: 03		

Full Name (Last, First, Middle Initial) <b>c. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 82.33
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Misc office supplies and paper	Transaction ID : SB17.5937
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Category/Type 001	
Office Sought: <input checked="" 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: WA District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	197.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 23		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Rapid Refill</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 308 E Mill Plain Blvd		Amount of Each Disbursement this Period 14.08 <b>Transaction ID : SB17.5868</b>
City Vancouver	State WA	
Purpose of Disbursement Ink		Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		
Office Sought: <input checked="" 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: WA District: 03		

Full Name (Last, First, Middle Initial) <b>B. Shur-Way Building Center</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 7124 NE St Johns Rd		Amount of Each Disbursement this Period 143.38 <b>Transaction ID : SB17.5876</b>
City Vancouver	State WA	
Purpose of Disbursement Materials for sign erection		Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		
Office Sought: <input checked="" 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: WA District: 03		

Full Name (Last, First, Middle Initial) <b>c. Shur-Way Building Center</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 7124 NE St Johns Rd		Amount of Each Disbursement this Period 224.91 <b>Transaction ID : SB17.5878</b>
City Vancouver	State WA	
Purpose of Disbursement Sign stakes		Category/ Type 001
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>		
Office Sought: <input checked="" 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: WA District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	382.37
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Shur-Way Building Center</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 7124 NE St Johns Rd		Amount of Each Disbursement this Period 40.63
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Sign erection materials	Transaction ID : SB17.5882
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Category/Type 001	
Office Sought: <input checked="" 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: WA	District: 03	

Full Name (Last, First, Middle Initial) <b>B. SmartPark</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 720 NW Lovejoy Ct		Amount of Each Disbursement this Period 3.40
City Portland	State OR	
Zip Code 97201	Purpose of Disbursement In-kind - Dingethal personal exp	Transaction ID : SB17.5951
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)	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Starbucks</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 7720 NE Hwy 99		Amount of Each Disbursement this Period 9.11
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement In-kind - Dingethal personal exp	Transaction ID : SB17.5957
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)	[MEMO ITEM]
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	40.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Thai Orchid</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 1004 Washington St		Amount of Each Disbursement this Period 27.00
City Vancouver	State WA	
Zip Code 98660	Purpose of Disbursement In-kind - Dingethal personal exp	Transaction ID : SB17.5954
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Couve Group</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 601 Main St, Ste 209		Amount of Each Disbursement this Period 2716.25
City Vancouver	State WA	
Zip Code 98660	Purpose of Disbursement Staff payroll and misc	Transaction ID : SB17.5880
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Category/Type 001	
Office Sought: <input checked="" 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: WA District: 03		

Full Name (Last, First, Middle Initial) <b>c. Total Merchant Concepts, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 12300 NE Fourth Plain Blvd		Amount of Each Disbursement this Period 7.95
City Vancouver	State WA	
Zip Code 98682	Purpose of Disbursement CC Fees	Transaction ID : SB17.5853
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Category/Type 003	
Office Sought: <input checked="" 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: WA District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2724.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 23		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Total Merchant Concepts, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 12300 NE Fourth Plain Blvd		Amount of Each Disbursement this Period 148.09 <b>Transaction ID : SB17.5856</b>
City Vancouver	State WA	
Zip Code 98682	Purpose of Disbursement CC Fees	Category/ Type 003
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" 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: WA District: 03	

Full Name (Last, First, Middle Initial) <b>B. UFCW 555</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2014
Mailing Address PO Box 23555		Amount of Each Disbursement this Period 712.50 <b>Transaction ID : SB17.5870</b>
City Tigard	State OR	
Zip Code 97281	Purpose of Disbursement Printing	Category/ Type 006
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" 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: WA District: 03	

Full Name (Last, First, Middle Initial) <b>c. Winco</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 9700 NE Hwy 99		Amount of Each Disbursement this Period 147.50 <b>Transaction ID : SB17.5861</b>
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Parade candy	Category/ Type 007
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" 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: WA District: 03	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1008.09
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 23		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

NAME OF COMMITTEE (In Full)  
**BOB DINGETHAL FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Winco</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 9700 NE Hwy 99		Amount of Each Disbursement this Period 17.50 <b>Transaction ID : SB17.5884</b>
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Food for staff meeting 001 Category/Type	
Candidate Name <b>BOB DINGETHAL FOR CONGRESS</b>	Office Sought: <input checked="" 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: WA District: 03		

Full Name (Last, First, Middle Initial) <b>B.</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) <b>C.</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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	17.50
<b>TOTAL</b> This Period (last page this line number only).....	8540.41

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4131**  
**BOB DINGETHAL FOR CONGRESS**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>BOB E DINGETHAL</b>	<b>[PERSONAL FUNDS]</b>	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 17811 NW 56TH AVE		

City	State	ZIP Code
RIDGEFIELD	WA	98642

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
175.95	0.00	175.95

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	M 11 / D 14 / Y 2013	M / D / Y 11/1/2014	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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	175.95
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>		

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4130

**BOB DINGETHAL FOR CONGRESS**

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

**[PERSONAL FUNDS]**

Election: 2014

**BOB E DINGETHAL**

Primary  
 General  
 Other (specify) ▼

Mailing Address  
17811 NW 56TH AVE

City State ZIP Code  
RIDGEFIELD WA 98642

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
2000.00 0.00 2000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 12 / D 02 / Y 2013 M M / D D / Y 11/1/2014 0.00 % (apr)  Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... ▶ 2000.00  
**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) **Transaction ID : SC/10.4150**  
**BOB DINGETHAL FOR CONGRESS**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>BOB E DINGETHAL</b>	<b>[PERSONAL FUNDS]</b>	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 17811 NW 56TH AVE		

City	State	ZIP Code
RIDGEFIELD	WA	98642

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200.00	0.00	200.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	M M / D D / Y Y Y Y 12 / 20 / 2013	M M / D D / Y Y Y Y 11/1/2014	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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	200.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	2375.95
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>		