

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								
-----------------	--	--	--	--	--	--	--	--

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 10 / 16 / 2014 To: M M / D D / Y Y Y Y 11 / 24 / 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))....	115658.43	582028.96
(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))	115658.43	582028.96
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	220891.52	551041.75
(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)).....	220891.52	551041.75
8. Cash on Hand at Close of Reporting Period (from Line 27).....	6932.49	
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).....	0.00	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

CLINT DIDIER FOR CONGRESS

Report Covering the Period: From: 10 / 16 / 2014 To: 11 / 24 / 2014

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 04 / 2014 (date of general election)	COLUMN C Total for 11 / 05 / 2014 (date after general election)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
98025.00	471179.39	0.00
(ii) Unitemized		
17633.43	110849.57	110.00
(iii) Total of contributions from individuals		
115658.43	582028.96	110.00
(b) Political Party Committees		
0.00	0.00	0.00
(c) Other Political Committees		
0.00	0.00	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 85

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
115658.43	582028.96	110.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	30000.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	30000.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
115658.43	612028.96	110.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 85

Write or Type Committee Name

CLINT DIDIER FOR CONGRESS

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

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
220891.52	551041.75	24164.72
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
30000.00	30000.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
30000.00	30000.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	0.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 85

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
-------------------------------	---	---

(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	0.00	0.00
------	------	------

21. OTHER DISBURSEMENTS

0.00	0.00	0.00
------	------	------

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

250891.52	581041.75	24164.72
-----------	-----------	----------

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

115658.43	582028.96	110.00
-----------	-----------	--------

IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

220891.52	551041.75	24164.72
-----------	-----------	----------

V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	142165.58
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	115658.43
25. SUBTOTAL (add Line 23 and Line 24).....	257824.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	250891.52
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	6932.49

**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 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ms LYNNE ALFE		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2014	
Mailing Address 4553 244TH PL SE		Transaction ID : SA11AI.9726	
City ISSAQUAH	State WA	Zip Code 98029	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
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 2635.00		
In-kind - WEB DESIGN SVCES			

Full Name (Last, First, Middle Initial) B. Mr. MIKE ALFE		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2014	
Mailing Address 4553 244TH PL SE		Transaction ID : SA11AI.9727	
City ISSAQUAH	State WA	Zip Code 98029	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer ALFE GRAPHICS	Occupation OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		
In-kind - WEB DESIGN SVCES			

Full Name (Last, First, Middle Initial) C. Ms ANDREE ALTON		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2014	
Mailing Address 712 N LANCASHIRE LN		Transaction ID : SA11AI.8782	
City LIBERTY LAKE	State WA	Zip Code 99019	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
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 4350.00		
DONATION			

SUBTOTAL of Receipts This Page (optional).....	5450.00
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 8 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. 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
4350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11AI.8783

Amount of Each Receipt this Period
250.00

DONATION

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

Mailing Address 8902 S DAWES ST

City KENNEWICK State WA Zip Code 99336

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

Name of Employer RON ASMUS HOME INC Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11AI.9448

Amount of Each Receipt this Period
1250.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms TRACEY ASMUS

Mailing Address 802 S DAWES ST

City KENNEWICK State WA Zip Code 99336

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

Name of Employer RON ASMUS HOME INC Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11AI.9450

Amount of Each Receipt this Period
1250.00

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 9 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms 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 **450.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11AI.9632

Amount of Each Receipt this Period
100.00

DONATION

B. Full Name (Last, First, Middle Initial)
BLAKE KOELZER

Mailing Address **3281 HOPE VALLEY RD**

City **ELTOPIA** State **WA** Zip Code **99330**

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
10 / 20 / 2014

Transaction ID : SA11AI.9186

Amount of Each Receipt this Period
500.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. MERLE BOOKER

Mailing Address **10971 COYAN RD**

City **CONNELL** State **WA** Zip Code **99326**

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

Name of Employer **MERLE D BOOKER FARM** Occupation **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
10 / 21 / 2014

Transaction ID : SA11AI.9037

Amount of Each Receipt this Period
1500.00

DONATION

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

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

Mailing Address 24928 107TH AVE SE

City State Zip Code
KENT WA 98030

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

Name of Employer Occupation
FRANKLIN CTY REPUB CENTRAL COM CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1567.39

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11AI.9016

Amount of Each Receipt this Period
500.00

DONATION

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

Mailing Address 24928 107TH AVE SE

City State Zip Code
KENT WA 98030

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

Name of Employer Occupation
FRANKLIN CTY REPUB CENTRAL COM CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1992.39

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11AI.9061

Amount of Each Receipt this Period
425.00

In-kind - AUTOGRAPHED FOOTBALL FOR FUNDRAISER

C. Full Name (Last, First, Middle Initial)
Mr. ALAN BOWMAN

Mailing Address 956 ADAMS RD N

City State Zip Code
QUINCY WA 98848

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

Name of Employer Occupation
ALAN BOWMAN CO 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
10 / 25 / 2014

Transaction ID : SA11AI.9208

Amount of Each Receipt this Period
2000.00

DONATION

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

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

2925.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms DOROTHY CAMPBELL

Mailing Address 4827 S PALOUSE HWY, APT 2505

City SPOKANE	State WA	Zip Code 99223
-----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11AI.9163

Amount of Each Receipt this Period
500.00

DONATION

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

Mailing Address 4827 S PALOUSE HWY, APT 2505

City SPOKANE	State WA	Zip Code 99223
-----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11AI.9161

Amount of Each Receipt this Period
500.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms CANDYCE CASEY

Mailing Address 2004 E 54TH

City SPOKANE	State WA	Zip Code 99223
-----------------	-------------	-------------------

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
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 01 / 2014

Transaction ID : SA11AI.9655

Amount of Each Receipt this Period
100.00

DONATION

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

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

1100.00

**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 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ms CHARLA CASEY		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2014	
Mailing Address 4011 YUMA DR		Transaction ID : SA11AI.9611	
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) B. Dr. THERESA CHEN		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2014	
Mailing Address 5304 W 8TH AVE		Transaction ID : SA11AI.9114	
City KENNEWICK	State WA	Zip Code 99336	Amount of Each Receipt this Period _____ 750.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer TRI-CITIES FOOT & ANKLE CLINIC	Occupation PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2250.00 _____		

Full Name (Last, First, Middle Initial) C. Mr. TIMOTHY CHEN		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2014	
Mailing Address 5304 W 8TH AVE		Transaction ID : SA11AI.9115	
City KENNEWICK	State WA	Zip Code 99336	Amount of Each Receipt this Period _____ 750.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer INLAND CARDIOLOGY ASSOCIATES	Occupation PHYSICAL		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 750.00 _____		

SUBTOTAL of Receipts This Page (optional).....	_____ 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 13 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
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 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11AI.9678

Amount of Each Receipt this Period
 1000.00

DONATION

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

Mailing Address 2616 N RD 96

City PASCO State WA Zip Code 99301

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

Name of Employer Occupation
 NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11AI.8937

Amount of Each Receipt this Period
 250.00

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 Occupation
 AERO'CE CONSU'ING & ENGINE'ING PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.8917

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 14 OF 85
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

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

Mailing Address 7017 CROMWELL WAY

City State Zip Code
SACRAMENTO CA 95822

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
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 31 2014

Transaction ID : SA11AI.9599

Amount of Each Receipt this Period
150.00

DONATION

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

Mailing Address 7724 BYERS RD

City State Zip Code
PASCO WA 99301

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

Name of Employer Occupation
HARMS PACIFIC TRANSPORT TRUCKING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 22 2014

Transaction ID : SA11AI.8959

Amount of Each Receipt this Period
500.00

DONATION

C. Full Name (Last, First, Middle Initial)
D J M ENTERPRISES

Mailing Address PO BOX 9292

City State Zip Code
SPOKANE WA 99209

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
 10 20 2014

Transaction ID : SA11AI.9159

Amount of Each Receipt this Period
500.00

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 15 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) Mr. JAMES DOWNEY		Date of Receipt M M / D D / Y Y Y Y 11 / 01 / 2014	
Mailing Address 26000 NEWBRIDGE DR		Transaction ID : SA11AI.9637	
City LOS ALTOS HILLS	State CA	Zip Code 94022	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer ALTOS SONOMA CORP	Occupation PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
		DONATION	

Full Name (Last, First, Middle Initial) Mr. LOYD DRENNAN		Date of Receipt M M / D D / Y Y Y Y 10 / 22 / 2014	
Mailing Address PO BOX 2204		Transaction ID : SA11AI.9181	
City COEUR D'ALENE	State ID	Zip Code 83816	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
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 250.00		
		DONATION	

Full Name (Last, First, Middle Initial) Ms MARY DRENNAN		Date of Receipt M M / D D / Y Y Y Y 10 / 16 / 2014	
Mailing Address PO BOX 2204		Transaction ID : SA11AI.9179	
City COEUR D'ALENE	State ID	Zip Code 83816	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
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 250.00		
		DONATION	

SUBTOTAL of Receipts This Page (optional).....	650.00
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 16 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. PETER DUFAULT

Mailing Address 15901 RD 28 SW

City MATTAWA State WA Zip Code 99349

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

Name of Employer DOUBLE D FARMS INC Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : SA11AI.9775

Amount of Each Receipt this Period
250.00

DONATION

B. Full Name (Last, First, Middle Initial)
Ms SUSAN DUFAULT

Mailing Address 15901 RD 28 SW

City MATTAWA State WA Zip Code 99349

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : SA11AI.9777

Amount of Each Receipt this Period
250.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. CODY EASTERDAY

Mailing Address 830 BELLFLOWER RD

City BASIN CITY State WA Zip Code 99343

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.8927

Amount of Each Receipt this Period
2600.00

DONATION

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

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

3100.00

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

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

FOR LINE NUMBER: PAGE 17 OF 85
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. 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 **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11AI.8832

Amount of Each Receipt this Period
100.00

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 **700.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : SA11AI.9212

Amount of Each Receipt this Period
100.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. KIRK ECKLUND

Mailing Address 301 MTN SHADOWS PL

City YAKIMA State WA Zip Code 98908

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

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.8835

Amount of Each Receipt this Period
250.00

DONATION

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

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

450.00

**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 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. HARRY EDMONDSON

Mailing Address 2006 NE 16TH ST

City RENTON State WA Zip Code 98056

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

Name of Employer HARRY CHRISTOPHER EDMONDSON Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.8926

Amount of Each Receipt this Period
25.00

DONATION

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

Mailing Address 1191 NE TEE LAKE RD

City TAHUYA State WA Zip Code 98588

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11AI.9597

Amount of Each Receipt this Period
50.00

DONATION

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

Mailing Address 1156 S BROWN RD

City CONNELL State WA Zip Code 99326

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11AI.8947

Amount of Each Receipt this Period
50.00

DONATION

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

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

125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) Mr. DAN EGBERT		Date of Receipt M M / D D / Y Y Y Y 10 / 22 / 2014	
Mailing Address 1156 S BROWN RD		Transaction ID : SA11AI.8948	
City CONNELL	State WA	Zip Code 99326	Amount of Each Receipt this Period _____ 50.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer SELF EMPLOYED	Occupation FARMER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 425.00 _____		

Full Name (Last, First, Middle Initial) Mr. LAWRENCE ELFERING		Date of Receipt M M / D D / Y Y Y Y 10 / 22 / 2014	
Mailing Address 4105 DESERT DR		Transaction ID : SA11AI.8966	
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 WA STATE UNIVERSITY	Occupation IT		
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 LILLIAN ERICKSON		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014	
Mailing Address 2408 243RD PL SW		Transaction ID : SA11AI.9226	
City BOTHELL	State WA	Zip Code 98021	Amount of Each Receipt this Period _____ 100.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00 _____		

SUBTOTAL of Receipts This Page (optional).....	_____ 650.00 _____
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 20 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FAMILY RESEARCH COUNCIL ACTION PAC

Mailing Address 801 G ST NW

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00452383

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11AI.9671

Amount of Each Receipt this Period
2500.00

DONATION

B. Full Name (Last, First, Middle Initial)
Ms BARBARA FANGMAN

Mailing Address 2421 LANGFORD RD

City State Zip Code
ELTOPIA WA 99330

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

Name of Employer Occupation
FANGMAN SPRAYING LLC CO-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
11 / 03 / 2014

Transaction ID : SA11AI.9764

Amount of Each Receipt this Period
250.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. JERRY FANGMAN

Mailing Address 2421 LANGFORD RD

City State Zip Code
ELTOPIA WA 99330

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

Name of Employer Occupation
FANGMAN SPRAYING LLC CO-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
11 / 03 / 2014

Transaction ID : SA11AI.9765

Amount of Each Receipt this Period
250.00

DONATION

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 21 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FANGMAN SPRAYING LLC

Mailing Address 2421 LANGFORD RD

City State Zip Code
ELTOPIA WA 99330

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
10 / 18 / 2014

Transaction ID : SA11AI.8843

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

B. Full Name (Last, First, Middle Initial)
FIRST PRINCIPLES FUND

Mailing Address 133 S HARBOR DR

City State Zip Code
VENICE FL 34285

FEC ID number of contributing federal political committee. **C** C00531822

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11AI.9383

Amount of Each Receipt this Period
1000.00
DONATION

C. Full Name (Last, First, Middle Initial)
Mr. JONNY FISHER

Mailing Address 1115 SW MARCIA DR

City State Zip Code
PULLMAN WA 99163

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

Name of Employer Occupation
SELF EMPLOYED DENTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.9356

Amount of Each Receipt this Period
500.00
DONATION

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

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

Mailing Address 1908 156TH ST NE

City ARLINGTON State WA Zip Code 98223

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2014

Transaction ID : SA11AI.9613

Amount of Each Receipt this Period
50.00

DONATION

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

Mailing Address 1155 15TH ST, NW STE 410

City WASHINGTON State DC Zip Code 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
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11AI.9390

Amount of Each Receipt this Period
2500.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms BONNIE FROST

Mailing Address 3010 W PENINSULA DR, UNIT 100

City MOSES LAKE State WA Zip Code 98837

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

Name of Employer DESERT GRAPHICS INC Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2014

Transaction ID : SA11AI.8860

Amount of Each Receipt this Period
250.00

DONATION

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

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

2800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

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

Mailing Address 1294 WHITE BLUFFS ST

City RICHLAND State WA Zip Code 99352

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
475.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.9003

Amount of Each Receipt this Period
75.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. GREGORY GERSON

Mailing Address 5015 ROBERT WAY DR

City PASCO State WA Zip Code 99301

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

Name of Employer NORTH FRANKLIN SCHOOL DISTRICT Occupation EDUCATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 19 / 2014

Transaction ID : SA11AI.8810

Amount of Each Receipt this Period
100.00

DONATION

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

Mailing Address 5511 WRIGLEY DR

City PASCO State WA Zip Code 99301

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

Name of Employer URS CORP Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : SA11AI.9610

Amount of Each Receipt this Period
50.00

DONATION

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

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

225.00

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

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

FOR LINE NUMBER: PAGE 24 OF 85
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

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

Mailing Address 22024 NE 66TH PL

City State Zip Code
REDMOND WA 98053

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
10 / 19 / 2014

Transaction ID : SA11AI.8797

Amount of Each Receipt this Period
500.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. PHIL GRAGG

Mailing Address 6560 E HILLDALE RD

City State Zip Code
PORT ORCHARD WA 98366

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
220.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11AI.9614

Amount of Each Receipt this Period
50.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. BOB HABERMAN

Mailing Address 771 HUNGRY JUNCTION RD

City State Zip Code
ELLENSBURG WA 98926

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

Name of Employer Occupation
ROBERT E HABERMAN OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 16 / 2014

Transaction ID : SA11AI.9099

Amount of Each Receipt this Period
500.00

DONATION

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

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 25 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ms SUSAN HABERMAN		Date of Receipt M M / D D / Y Y Y Y 10 / 16 / 2014	
Mailing Address 771 HUNGRY JUNCTION RD		Transaction ID : SA11AI.9097	
City ELLENSBURG	State WA	Zip Code 98926	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
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 500.00		

Full Name (Last, First, Middle Initial) B. Mr. SAM HANSEN		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2014	
Mailing Address 224603 E MAIN ST		Transaction ID : SA11AI.9032	
City KENNEWICK	State WA	Zip Code 99337	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) C. Mr. HENRY HARBERT		Date of Receipt M M / D D / Y Y Y Y 10 / 22 / 2014	
Mailing Address 206 NE 126TH AVE, #159		Transaction ID : SA11AI.9406	
City VANCOUVER	State WA	Zip Code 98684	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
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 500.00		

SUBTOTAL of Receipts This Page (optional).....	1100.00
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 26 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HAYES FARMS		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2014	
Mailing Address 41 N BAART RD		Transaction ID : SA11AI.9136	
City MESA	State WA	Zip Code 99343	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 800.00	
Name of Employer Occupation		DONATION	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1800.00	

Full Name (Last, First, Middle Initial) B. Ms DONNA HEINEN		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014	
Mailing Address 410 N NEWPORT DR		Transaction ID : SA11AI.9490	
City MESA	State WA	Zip Code 99343	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer Occupation LUCKY H FARMS INC CO-OWNER		DONATION	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) C. Mr. MICHAEL HENRY		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2014	
Mailing Address 24709 SUNSET MEADOW LOOP		Transaction ID : SA11AI.8975	
City KENNEWICK	State WA	Zip Code 99338	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Occupation NOTUS INVESTMENTS LLC AGENT		DONATION	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00	

SUBTOTAL of Receipts This Page (optional).....	4900.00
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 27 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ms REBECCA HENRY		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2014	
Mailing Address 24709 SUNSET MEADOW LOOP		Transaction ID : SA11AI.8977	
City KENNEWICK	State WA	Zip Code 99338	Amount of Each Receipt this Period _____ 2600.00 DONATION
FEC ID number of contributing federal political committee.		C _____	
Name of Employer NONE	Occupation HOMEMAKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2600.00		

Full Name (Last, First, Middle Initial) B. Mr. DON HUNTZINGER		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2014	
Mailing Address 501 RINGOLD RIVER RD		Transaction ID : SA11AI.8849	
City MESA	State WA	Zip Code 99343	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 _____ 750.00		

Full Name (Last, First, Middle Initial) C. Ms TINY (VIOLET) HUNTZINGER		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2014	
Mailing Address 501 RINGOLD RIVER RD		Transaction ID : SA11AI.8850	
City MESA	State WA	Zip Code 99343	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 _____ 750.00		

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 28 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

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

Mailing Address **PO BOX 1144**

City **TROY** State **MT** Zip Code **59935**

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

Name of Employer **CHLOR RID** Occupation **MARKETING**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11AI.9557

Amount of Each Receipt this Period
100.00

DONATION

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

Mailing Address **4501 W WILLIAMS RD**

City **BENTON CITY** State **WA** Zip Code **99320**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11AI.8905

Amount of Each Receipt this Period
150.00

DONATION

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

Mailing Address **PO BOX 2997**

City **GRAND RAPIDS** State **MI** Zip Code **49501**

FEC ID number of contributing federal political committee. **C C00525717**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11AI.9381

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 29 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) Mr. TOM KIMBALL		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2014	
Mailing Address 3534 HANSTEAD ST		Transaction ID : SA11AI.9015	
City RICHLAND	State WA	Zip Code 99352	Amount of Each Receipt this Period _____ 200.00 DONATION
FEC ID number of contributing federal political committee.		C _____	
Name of Employer CISCO SYSTEMS	Occupation ACCT MGR		
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) Mr. FRANCIS LA ROSEE		Date of Receipt M M / D D / Y Y Y Y 10 / 26 / 2014	
Mailing Address 10624 HANDICAP DR SE		Transaction ID : SA11AI.9478	
City WARDEN	State WA	Zip Code 98857	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 750.00		

Full Name (Last, First, Middle Initial) Ms SUNNY LA ROSEE		Date of Receipt M M / D D / Y Y Y Y 10 / 26 / 2014	
Mailing Address 10624 HANDICAP DR SE		Transaction ID : SA11AI.9480	
City WARDEN	State WA	Zip Code 98857	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 750.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 1700.00
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 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LAUTENSCHLAGER & SONS

Mailing Address 1251 CUTLER-LAUTENSCHLAGER RD

City ENDICOTT State WA Zip Code 99125

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2100.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11AI.9101

Amount of Each Receipt this Period
2100.00

DONATION

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

Mailing Address 2600 W 34TH AVE

City KENNEWICK State WA Zip Code 99337

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
650.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.9058

Amount of Each Receipt this Period
400.00

In-kind - COPY OF US CONSTITUTION AT FUNDRAISER

C. Full Name (Last, First, Middle Initial)
Mr. BARCLAY LEW

Mailing Address 100804 E REATA RD

City KENNEWICK State WA Zip Code 99338

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

Name of Employer Occupation
DEPT OF ENERGY NUCLEAR ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
280.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : SA11AI.9596

Amount of Each Receipt this Period
100.00

DONATION

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

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

2600.00

**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 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. MATT LOGAN		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014	
Mailing Address 410 N NEWPORT DR		Transaction ID : SA11AI.9489	
City MESA	State WA	Zip Code 99343	Amount of Each Receipt this Period _____ 1500.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer NONE	Occupation UNEMPLOYED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1500.00		

Full Name (Last, First, Middle Initial) B. Ms AMY MACHUGH		Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2014	
Mailing Address 660 DOGWOOD		Transaction ID : SA11AI.8882	
City PASCO	State WA	Zip Code 99301	Amount of Each Receipt this Period _____ 1000.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer JACKASS MTN RANCH	Occupation CO-OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) C. Mr. WILLIAM MAGER		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2014	
Mailing Address 2004 S BEECH ST		Transaction ID : SA11AI.9562	
City KENNEWICK	State WA	Zip Code 99337	Amount of Each Receipt this Period _____ 75.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer LABOR READY	Occupation BRANCH MGR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 225.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 2575.00
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 32 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARIJUANA POLICY PROJECT PAC

Mailing Address PO BOX 77492

City State Zip Code
WASHINGTON DC 20013

FEC ID number of contributing federal political committee. **C** C00389882

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
11 / 03 / 2014

Transaction ID : SA11AI.9813

Amount of Each Receipt this Period
5000.00

DONATION

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

Mailing Address 9120 RUSSELL RD

City State Zip Code
MESA WA 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
700.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11AI.9366

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 State Zip Code
MESA WA 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
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11AI.9367

Amount of Each Receipt this Period
250.00

DONATION

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) Mr. TOM MCCABE		Date of Receipt M M / D D / Y Y Y Y 10 / 22 / 2014	
Mailing Address 1424 10TH AVE SW		Transaction ID : SA11AI.9169	
City OLYMPIA	State WA	Zip Code 98502	Amount of Each Receipt this Period _____ 100.00 DONATION
FEC ID number of contributing federal political committee.		C _____	
Name of Employer FREEDOM FOUNDATION	Occupation CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 600.00		

Full Name (Last, First, Middle Initial) Mr. JIM MCCUNE		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address PO BOX 1287		Transaction ID : SA11AI.9646	
City GRAHAM	State WA	Zip Code 98338	Amount of Each Receipt this Period _____ 250.00 DONATION
FEC ID number of contributing federal political committee.		C _____	
Name of Employer PIERCE COUNTY	Occupation COUNCILMAN		
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. BILL MCDANIEL		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2014	
Mailing Address PO BOX 732		Transaction ID : SA11AI.8908	
City TONASKET	State WA	Zip Code 98855	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 _____ 350.00		

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: (check only one)	PAGE 34 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. BILL MCDANIEL		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2014	
Mailing Address PO BOX 732		Transaction ID : SA11AI.8909	
City TONASKET	State WA	Zip Code 98855	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
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 600.00		
		DONATION	

Full Name (Last, First, Middle Initial) B. Mr. DWAYNE MCDONALD		Date of Receipt M M / D D / Y Y Y Y 10 / 22 / 2014	
Mailing Address 106514 E 297 PR SE		Transaction ID : SA11AI.9109	
City KENNEWICK	State WA	Zip Code 99338	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer SELF EMPLOYED	Occupation OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3600.00		
		DONATION	

Full Name (Last, First, Middle Initial) C. Mr. FREDERICK MCDONALD		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 416 S 56TH AVE		Transaction ID : SA11AI.9630	
City YAKIMA	State WA	Zip Code 98908	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
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 250.00		
		DONATION	

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 35 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ms HEATHER MCDONALD		Date of Receipt M M / D D / Y Y Y Y 10 / 22 / 2014	
Mailing Address 106514 E 297 PR SE		Transaction ID : SA11AI.9112	
City KENNEWICK	State WA	Zip Code 99338	Amount of Each Receipt this Period _____ 1150.00 DONATION
FEC ID number of contributing federal political committee.		C _____	
Name of Employer ADP	Occupation SALES MGR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1150.00		

Full Name (Last, First, Middle Initial) B. Mr. SCOTT MCEACHIN		Date of Receipt M M / D D / Y Y Y Y 11 / 01 / 2014	
Mailing Address 7032 E 100TH ST		Transaction ID : SA11AI.9638	
City TULSA	State OK	Zip Code 74113	Amount of Each Receipt this Period _____ 250.00 DONATION
FEC ID number of contributing federal political committee.		C _____	
Name of Employer SCOTT WILLIAM MCEACHIN, PC	Occupation ATTORNEY		
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. Ms MICKI MCKINNON		Date of Receipt M M / D D / Y Y Y Y 10 / 22 / 2014	
Mailing Address 3104 W KENNEWICK AVE, STE D		Transaction ID : SA11AI.9192	
City KENNEWICK	State WA	Zip Code 99336	Amount of Each Receipt this Period _____ 1000.00 DONATION
FEC ID number of contributing federal political committee.		C _____	
Name of Employer SELF EMPLOYED	Occupation REALTOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1150.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 2400.00
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 36 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. RICHARD MCKINNON

Mailing Address 3104 W KENNEWICK AVE, STE D

City State Zip Code
KENNEWICK WA 99336

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

Name of Employer Occupation
SELF-EMPLOYED REALTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1150.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11AI.9876

Amount of Each Receipt this Period
1000.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. SIDNEY MCVEY

Mailing Address 11925 S 49TH W AVE

City State Zip Code
SAPULPA OK 74066

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

Name of Employer Occupation
SELF EMPLOYED FARMER/ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : SA11AI.9466

Amount of Each Receipt this Period
1000.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. GARY MIDDLETON

Mailing Address PO BOX 159

City State Zip Code
ELTOPIA WA 99330

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

Name of Employer Occupation
GARY MIDDLETON FARMS INC OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : SA11AI.9402

Amount of Each Receipt this Period
750.00

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 37 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. DAN MILDON

Mailing Address 94105 E REATA RD

City State Zip Code
KENNEWICK WA 99338

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
 10 / 22 / 2014

Transaction ID : SA11AI.9028

Amount of Each Receipt this Period
500.00

DONATION

B. Full Name (Last, First, Middle Initial)
Ms PAMELA MILDON

Mailing Address 94105 REATA RD

City State Zip Code
KENNEWICK WA 99338

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
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11AI.9029

Amount of Each Receipt this Period
500.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms SUSAN MISCHER

Mailing Address 16222 67TH AVE NE

City State Zip Code
ARLINGTON WA 98223

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

Name of Employer Occupation
ELECTRIC MIRROR VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11AI.9539

Amount of Each Receipt this Period
500.00

DONATION

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms MICHELLE MORTON

Mailing Address 205913 E BOWLES RD

City State Zip Code
KENNEWICK WA 99337

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.9592

Amount of Each Receipt this Period

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. SCOTT MUSSER

Mailing Address 3035 RICKENBACKER DR

City State Zip Code
PASCO WA 99301

FEC ID number of contributing federal political committee.

Name of Employer Occupation
MUSSER BROS INC AUCTIONEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.9119

Amount of Each Receipt this Period

DONATION

C. Full Name (Last, First, Middle Initial)
Ms TERESA MUSSER

Mailing Address 3035 RICKENBACKER DR

City State Zip Code
PASCO WA 99301

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.9120

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 39 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

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

Mailing Address 6808 W 15TH

City State Zip Code
KENNEWICK WA 99338

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11AI.8999

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 State Zip Code
KENNEWICK WA 99338

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11AI.8998

Amount of Each Receipt this Period
250.00

DONATION

C. Full Name (Last, First, Middle Initial)
OUR COUNTRY DESERVES BETTER

Mailing Address PO BOX 984

City State Zip Code
WILLOWS CA 95968

FEC ID number of contributing federal political committee. **C** C00454074

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11AI.9386

Amount of Each Receipt this Period
1000.00

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: (check only one)	PAGE 40 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

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

Mailing Address 3801 S WILEY RD

City State Zip Code
YAKIMA WA 98903

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

Name of Employer Occupation
TRIUMPH GROUP ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11AI.8951

Amount of Each Receipt this Period
100.00

DONATION

B. 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
650.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11AI.9027

Amount of Each Receipt this Period
100.00

DONATION

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

Mailing Address 315 FOXTAIL LN

City State Zip Code
SPRING CITY PA 19475

FEC ID number of contributing federal political committee. **C** C00528307

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11AI.9690

Amount of Each Receipt this Period
1000.00

DONATION

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

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

1200.00

**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 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PAUL GOSAR FOR CONGRESS

Mailing Address PO BOX 2991

City State Zip Code
FLORENCE AZ 85132

FEC ID number of contributing federal political committee. **C** C00461806

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : SA11AI.9452

Amount of Each Receipt this Period
2000.00

DONATION

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

Mailing Address 311 MILLWOOD LN

City State Zip Code
MESA WA 99343

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

Name of Employer Occupation
SELF EMPLOYED CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1050.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11AI.9650

Amount of Each Receipt this Period
50.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms FAYE PHIPPS

Mailing Address 1800 RANGER DR

City State Zip Code
MESA WA 99343

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : SA11AI.8987

Amount of Each Receipt this Period
300.00

DONATION

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

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

2350.00

**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 42 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. STEPHEN PIDGEON

Mailing Address 3002 COLBY AVE, STE 306

City EVERETT State WA Zip Code 98201

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

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : SA11AI.9499

Amount of Each Receipt this Period
2600.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. DENNIS POLAND

Mailing Address 199864 GAME FARM RD

City KENNEWICK State WA Zip Code 99337

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

Name of Employer RAY POLAND & SONS CONSTRUCTION Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.9039

Amount of Each Receipt this Period
1500.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms NANCY PUFF

Mailing Address 731 MANATEE COVE

City VERO BEACH State FL Zip Code 32963

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : SA11AI.9443

Amount of Each Receipt this Period
250.00

DONATION

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

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

4350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. ROBERT PUFF Jr.

Mailing Address 731 MANATEE COVE

City State Zip Code
VERO BEACH FL 32963

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.9441

Amount of Each Receipt this Period

DONATION

B. Full Name (Last, First, Middle Initial)
Ms DIANE REBHOLZ

Mailing Address 2640 NW 90TH ST

City State Zip Code
SEATTLE WA 98117

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.9414

Amount of Each Receipt this Period

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. GARY REBHOLZ

Mailing Address 2640 NW 90TH ST

City State Zip Code
SEATTLE WA 98117

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.9415

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: PAGE 44 OF 85
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

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

Mailing Address 4236 140TH AVE NE

City State Zip Code
BELLEVUE WA 98005

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 22 2014

Transaction ID : SA11AI.9403

Amount of Each Receipt this Period
250.00

DONATION

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

Mailing Address 4236 140TH AVE NE

City State Zip Code
BELLEVUE WA 98005

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 31 2014

Transaction ID : SA11AI.9593

Amount of Each Receipt this Period
50.00

DONATION

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

Mailing Address 7721 N CAMPBELL RD

City State Zip Code
OTIS ORCHARDS WA 99027

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
 10 22 2014

Transaction ID : SA11AI.9166

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 45 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. ROD ROTTINGHAUS

Mailing Address 19 E SAGEMOOR LN

City PASCO State WA Zip Code 99301

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

Name of Employer ROD ROTTINGHAUS FARMS Occupation 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 Y Y
 10 / 28 / 2014

Transaction ID : SA11AI.9492

Amount of Each Receipt this Period
1000.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. FAWN RUPP

Mailing Address 420 N RD 49

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
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.9013

Amount of Each Receipt this Period
225.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. FAWN RUPP

Mailing Address 420 N RD 49

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) 10/21/14

Election Cycle-to-Date
1025.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.9057

Amount of Each Receipt this Period
800.00

AUTOGRAPHED FOOTBALL AT FUNDRAISER

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

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

2025.00

**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 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. FAWN RUPP

Mailing Address 420 N RD 49

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
1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.9122

Amount of Each Receipt this Period
775.00

DONATION

B. Full Name (Last, First, Middle Initial)
Ms LUZ RUPP

Mailing Address 176 KRANICHWOOD ST

City RICHLAND State WA Zip Code 99352

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.9126

Amount of Each Receipt this Period
650.00

DONATION

C. Full Name (Last, First, Middle Initial)
Mr. RANDY RUPP

Mailing Address 176 KRANICHWOOD ST

City RICHLAND State WA Zip Code 99352

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

Name of Employer RUPP RANCHES Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.9124

Amount of Each Receipt this Period
650.00

DONATION

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

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

2075.00

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

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

FOR LINE NUMBER: PAGE 47 OF 85
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms ROSA RUPP

Mailing Address 420 N RD 49

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
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.9011

Amount of Each Receipt this Period
225.00

DONATION

B. Full Name (Last, First, Middle Initial)
Ms ROSA RUPP

Mailing Address 420 N RD 49

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
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.9123

Amount of Each Receipt this Period
775.00

DONATION

C. Full Name (Last, First, Middle Initial)
RUPP RANCHES

Mailing Address 176 KRANICHWOOD ST

City RICHLAND State WA Zip Code 99352

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : SA11AI.9134

Amount of Each Receipt this Period
2000.00

DONATION

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 48 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. RICHARD SANDERS		Date of Receipt M M / D D / Y Y Y Y 10 / 16 / 2014	
Mailing Address 25974 GOLD BEACH DR SW		Transaction ID : SA11AI.8772	
City VASHON	State WA	Zip Code 98070	Amount of Each Receipt this Period _____ 250.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer GOODSTEIN LAW GRP	Occupation ATTORNEY		
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. BRENT SCHULTHIES		Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2014	
Mailing Address 44505 W GWINN RD		Transaction ID : SA11AI.9377	
City PROSSER	State WA	Zip Code 99350	Amount of Each Receipt this Period _____ 750.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer BRENT SCHULTHIES FARMS LLC	Occupation 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 ELAINE SCHULTHIES		Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2014	
Mailing Address 44505 W GWINN RD		Transaction ID : SA11AI.9379	
City PROSSER	State WA	Zip Code 99350	Amount of Each Receipt this Period _____ 750.00 DONATION
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer BRENT SCHULTHIES FARMS LLC	Occupation 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 _____		

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: PAGE 49 OF 85
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. ROBERT SIEG

Mailing Address **PO BOX 85**

City **HARTLINE** State **WA** Zip Code **99135**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 19 / 2014

Transaction ID : SA11AI.8800

Amount of Each Receipt this Period
250.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. DOUGLAS SIMPSON

Mailing Address **6010 WYNN JONES RD E**

City **PORT ORCHARD** State **WA** Zip Code **98366**

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
3962.50

Date of Receipt
 M M / D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11AI.9251

Amount of Each Receipt this Period
1362.50

DONATION

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

Mailing Address **6010 WYNN JONES RD E**

City **PORT ORCHARD** State **WA** Zip Code **98366**

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

Name of Employer **THE CAPITOL PROJECT** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3962.50

Date of Receipt
 M M / D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : SA11AI.9252

Amount of Each Receipt this Period
1362.50

DONATION

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

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

2975.00

**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 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ms RENEE SLOCUMB		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2014	
Mailing Address 2103 SUNRISE CT		Transaction ID : SA11AI.9465	
City WEST RICHLAND	State WA	Zip Code 99353	Amount of Each Receipt this Period 400.00 DONATION
FEC ID number of contributing federal political committee. C			
Name of Employer BECHTEL	Occupation ENGINEER		
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) B. Mr. DONALD SMITH		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 502 N RD 47		Transaction ID : SA11AI.9635	
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 SELF EMPLOYED	Occupation FARMER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00		

Full Name (Last, First, Middle Initial) C. Mr. ROBERT STELMACK		Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2014	
Mailing Address 2532 BANYON ST		Transaction ID : SA11AI.8991	
City RICHLAND	State WA	Zip Code 99352	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		

SUBTOTAL of Receipts This Page (optional).....	550.00
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 51 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. TROY STOKES

Mailing Address 3403 E LATTIN RD

City WEST RICHLAND State WA Zip Code 99353

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

Name of Employer HILINE ENGINEER'NG & FABR'TION Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : SA11AI.9437

Amount of Each Receipt this Period
2600.00

DONATION

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

Mailing Address 1602 S FILLMORE ST

City KENNEWICK State WA Zip Code 99338

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

Name of Employer FRED MEYER Occupation CLERK

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
950.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 25 / 2014

Transaction ID : SA11AI.9206

Amount of Each Receipt this Period
50.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms BARBARA 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
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.9008

Amount of Each Receipt this Period
25.00

DONATION

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

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

2675.00

**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 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ms BARBARA 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 **325.00**

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

Transaction ID : SA11AI.9766

Amount of Each Receipt this Period
 25.00

DONATION

B. 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 **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : SA11AI.9009

Amount of Each Receipt this Period
 25.00

DONATION

C. 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 **325.00**

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

Transaction ID : SA11AI.9767

Amount of Each Receipt this Period
 25.00

DONATION

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

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

75.00

**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 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STUTZMAN FOR CONGRESS

Mailing Address 250 W 600 N

City State Zip Code
HOWE IN 46746

FEC ID number of contributing federal political committee. **C** C00484683

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : SA11AI.9672

Amount of Each Receipt this Period
2000.00

DONATION

B. Full Name (Last, First, Middle Initial)
Mr. GEORGE SWAGEL

Mailing Address 5522 W COMMANCHE AVE

City State Zip Code
SPOKANE WA 99208

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
11 / 01 / 2014

Transaction ID : SA11AI.9809

Amount of Each Receipt this Period
125.00

DONATION

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

Mailing Address 6753 E TILSTRA RD

City State Zip Code
BENTON CITY WA 99320

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11AI.8933

Amount of Each Receipt this Period
100.00

DONATION

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

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

2225.00

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

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

FOR LINE NUMBER: PAGE 54 OF 85
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

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

Mailing Address 6712 W OCTAVE 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
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 31 2014

Transaction ID : SA11AI.9576

Amount of Each Receipt this Period
 100.00

DONATION

B. Full Name (Last, First, Middle Initial)
WALTER JONES COMMITTEE

Mailing Address PO BOX 3962

City State Zip Code
GREENVILLE NC 27836

FEC ID number of contributing federal political committee. **C** C00305052

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 27 2014

Transaction ID : SA11AI.9388

Amount of Each Receipt this Period
 1000.00

DONATION

C. Full Name (Last, First, Middle Initial)
Ms TERRIE WEITZEL

Mailing Address 1409 HAINS

City State Zip Code
RICHLAND WA 99354

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

Name of Employer Occupation
PROGRESSIVE SALES, INC REALTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 21 2014

Transaction ID : SA11AI.9117

Amount of Each Receipt this Period
 450.00

DONATION

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 85
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. RONALD WORSHAM		Date of Receipt M M / D D / Y Y Y Y 10 / 27 / 2014	
Mailing Address 2690 ST RD 17		Transaction ID : SA11AI.9433	
City MESA State WA Zip Code 99343	Amount of Each Receipt this Period 1000.00 DONATION		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation WORSHAM FARM CO-OWNER		
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) B. Ms SAUNDRA WORSHAM		Date of Receipt M M / D D / Y Y Y Y 10 / 27 / 2014	
Mailing Address 2690 ST RD 17		Transaction ID : SA11AI.9435	
City MESA State WA Zip Code 99343	Amount of Each Receipt this Period 1000.00 DONATION		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation WORSHAM FARM CO-OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. Mr. BILL YOUNG		Date of Receipt M M / D D / Y Y Y Y 11 / 03 / 2014	
Mailing Address 2082 GRAND FIR DR		Transaction ID : SA11AI.9812	
City ENUMCLAW State WA Zip Code 98022	Amount of Each Receipt this Period 50.00 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 250.00		

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	98025.00

**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 56 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. WARREN AABERG		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 5416 W UMATILLA AVE		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.9721
City KENNEWICK	State WA	
Zip Code 99336	Purpose of Disbursement COORDINATING TV & RADIO 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) B. ACN RADIO NETWORK		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address PO BOX 31000		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.9619
City SPOKANE	State WA	
Zip Code 99223	Purpose of Disbursement RADIO 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. ACTION SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 6855 NE ARNOLD AVE		Amount of Each Disbursement this Period 1570.50 Transaction ID : SB17.9654
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).....	3570.50
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 57 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. ACTION SOLUTIONS

Full Name (Last, First, Middle Initial)
Mailing Address 6855 NE ARNOLD AVE

City ADAIR VILLAGE State OR Zip Code 97330

Purpose of Disbursement
ROBO CALLS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

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

Amount of Each Disbursement this Period
1584.81

Transaction ID : SB17.9817

Category/Type

B. Ms LYNNE ALFE

Full Name (Last, First, Middle Initial)
Mailing Address 4553 244TH PL SE

City ISSAQUAH State WA Zip Code 98029

Purpose of Disbursement
In-kind - WEB DESIGN SVCES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 04 / 2014

Amount of Each Disbursement this Period
2600.00

Transaction ID : SB17.9730

Category/Type

C. Ms LYNNE ALFE

Full Name (Last, First, Middle Initial)
Mailing Address 4553 244TH PL SE

City ISSAQUAH State WA Zip Code 98029

Purpose of Disbursement
WEBSITE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 04 / 2014

Amount of Each Disbursement this Period
1000.00

Transaction ID : SB17.9735

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 5184.81

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 58 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. MIKE ALFE		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 4553 244TH PL SE		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB17.9729
City ISSAQUAH State WA Zip Code 98029	Purpose of Disbursement In-kind - WEB DESIGN SVCES	
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. MIKE ALFE		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 4553 244TH PL SE		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.9736
City ISSAQUAH State WA Zip Code 98029	Purpose of Disbursement WEBSITE	
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. ALLIED LAW FIRM PLLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 6951 MLK JUNIOR WAY S STE 226		Amount of Each Disbursement this Period 1153.82 Transaction ID : SB17.9785
City SEATTLE State WA Zip Code 98118	Purpose of Disbursement LEGAL SVCES	
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).....	4753.82
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 59 OF 85		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 200 VESEY ST		Amount of Each Disbursement this Period 7.95
City NEW YORK	State NY	
Zip Code 10285	Purpose of Disbursement ONLINE FEES	Transaction ID : SB17.9713
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. APPLEBEE'S NEIGHBORHOOD GRILL		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 5305 N RD 68		Amount of Each Disbursement this Period 31.01
City PASCO	State WA	
Zip Code 99301	Purpose of Disbursement BREAKFAST MTG	Transaction ID : SB17.8790
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. APPLEBEE'S NEIGHBORHOOD GRILL		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 5305 N RD 68		Amount of Each Disbursement this Period 67.52
City PASCO	State WA	
Zip Code 99301	Purpose of Disbursement CONSUMABLES & MTG	Transaction ID : SB17.8961
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).....	106.48
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 60 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

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

Mailing Address 5305 N RD 68

City PASCO State WA Zip Code 99301

Purpose of Disbursement
MTG & CONSUMABLES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 24 / 2014

Amount of Each Disbursement this Period
33.18

Transaction ID : SB17.9084

Category/Type

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

Mailing Address 5305 N RD 68

City PASCO State WA Zip Code 99301

Purpose of Disbursement
LUNCH & MTG

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 28 / 2014

Amount of Each Disbursement this Period
49.29

Transaction ID : SB17.9520

Category/Type

Full Name (Last, First, Middle Initial)
C. ARS FRESNO TESORO

Mailing Address 4804 N RD 68

City PASCO State WA Zip Code 99301

Purpose of Disbursement
FUEL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 28 / 2014

Amount of Each Disbursement this Period
76.80

Transaction ID : SB17.9519

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 159.27

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 61 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ms CHARLOTTE BENJAMIN		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 10024 E HOLMAN RD		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.9737
City SPOKANE VALLEY	State WA	
Zip Code 99206	Purpose of Disbursement ACCT'NG & FILING SVCES	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. Mr. WILLIAM BOULDS		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 24928 107TH AVE SE		Amount of Each Disbursement this Period 425.00 Transaction ID : SB17.9062
City KENT	State WA	
Zip Code 98030	Purpose of Disbursement In-kind - AUTOGRAPHED FOOTBALL FOR FUNDRAISER	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. Mr. MATT BOWER		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 831 ROZA DR		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.8838
City ZILLAH	State WA	
Zip Code 98953	Purpose of Disbursement REIMB FOR RENTAL RM	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).....	1675.00
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 62 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CALLAHAN DAIRY LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address PO BOX 205		Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.9621
City ROYAL CITY	State WA	
Zip Code 99357	Purpose of Disbursement REIMB IN 4TH QTR	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. CHARTER MEDIA		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 1650 DES PERES RD		Amount of Each Disbursement this Period 2582.30 Transaction ID : SB17.9626
City ST LOUIS	State MO	
Zip Code 63131	Purpose of Disbursement CABLE TV 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. CHARTER MEDIA		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 1650 DES PERES RD		Amount of Each Disbursement this Period 892.50 Transaction ID : SB17.9710
City ST LOUIS	State MO	
Zip Code 63131	Purpose of Disbursement CABLE TV 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:	

SUBTOTAL of Disbursements This Page (optional).....	3774.80
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 63 OF 85			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CLINE COMPUTERS		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 2161 VAN GIESEN ST		Amount of Each Disbursement this Period 194.94 Transaction ID : SB17.8823
City RICHLAND State WA Zip Code 99354	Purpose of Disbursement COMPUTER REPAIR	
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. CMDI		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 389.08 Transaction ID : SB17.8770
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	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 10 / 23 / 2014
Mailing Address 1593 SPRING HILL RD STE 400		Amount of Each Disbursement this Period 444.91 Transaction ID : SB17.9049
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	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).....	1028.93
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 64 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement
Mailing Address 1593 SPRING HILL RD STE 400		M M / D D / Y Y Y Y 10 / 30 / 2014
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement MAIL & INVOICES	Amount of Each Disbursement this Period 472.76	
Candidate Name	Transaction ID : SB17.9629	
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:		

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement
Mailing Address 1593 SPRING HILL RD STE 400		M M / D D / Y Y Y Y 11 / 06 / 2014
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement MAIL & INVOICES	Amount of Each Disbursement this Period 469.68	
Candidate Name	Transaction ID : SB17.9790	
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:		

Full Name (Last, First, Middle Initial) C. CMDI		Date of Disbursement
Mailing Address 1593 SPRING HILL RD STE 400		M M / D D / Y Y Y Y 11 / 20 / 2014
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement MAIL & INVOICES	Amount of Each Disbursement this Period 2.70	
Candidate Name	Transaction ID : SB17.9829	
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).....	945.14
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 65 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. COLUMBIA RIVER MEDIA GRP

Mailing Address 1124 N MILLER ST

City WENATCHEE State WA Zip Code 98801

Purpose of Disbursement
ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 23 / 2014

Amount of Each Disbursement this Period
1000.00

Transaction ID : SB17.9050

Category/Type

Full Name (Last, First, Middle Initial)
B. CONSTANT CONTACT

Mailing Address 1601 TRAPELO RD, RESERVOIR RD

City WALTHAM State MA Zip Code 02451

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 27 / 2014

Amount of Each Disbursement this Period
8.00

Transaction ID : SB17.9244

Category/Type

Full Name (Last, First, Middle Initial)
C. CRAGG'S EXCAVATING

Mailing Address PO BOX 67, 102 N MAIN

City STEHEKIN State WA Zip Code 98852

Purpose of Disbursement
REIMB FM 2ND QTR

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 30 / 2014

Amount of Each Disbursement this Period
250.00

Transaction ID : SB17.9622

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 1258.00

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 66 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DIRECT MAIL ENTERPRISES INC		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 812 N NAPA		Amount of Each Disbursement this Period 46570.98 Transaction ID : SB17.8787
City SPOKANE State WA Zip Code 99202	Purpose of Disbursement MAILERS	
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. DIRECT MAIL ENTERPRISES INC		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 812 N NAPA		Amount of Each Disbursement this Period 33645.32 Transaction ID : SB17.8842
City SPOKANE State WA Zip Code 99202	Purpose of Disbursement MAILERS	
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. EAGLE NEWSPAPERS INC		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 4901 INDIAN SCHOOL NE RD		Amount of Each Disbursement this Period 450.00 Transaction ID : SB17.9716
City SALEM State OR Zip Code 97305	Purpose of Disbursement ADVERTISING	
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).....	80666.30
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 67 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ELTOPIA IRRIGATION, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 2481 E SAGEMOOR RD		Amount of Each Disbursement this Period 350.00
City PASCO State WA Zip Code 99301	Purpose of Disbursement REIMB FM 3RD QTR	
Candidate Name	Category/Type	Transaction ID : SB17.8818
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. FANGMAN SPRAYING LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 2421 LANGFORD RD		Amount of Each Disbursement this Period 500.00
City ELTOPIA State WA Zip Code 99330	Purpose of Disbursement REIMB FM 4TH QTR	
Candidate Name	Category/Type	Transaction ID : SB17.9738
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. DAVID FERMAN		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 2104 E PHINNEY BAY DR		Amount of Each Disbursement this Period 500.00
City BREMERTON State WA Zip Code 98312	Purpose of Disbursement SIGNAGE	
Candidate Name	Category/Type	Transaction ID : SB17.9720
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).....	1350.00
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 68 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

A. HELP-U-MOVE

Full Name (Last, First, Middle Initial)
Mailing Address 3412 N SWALLOW AVE

City PASCO State WA Zip Code 99301

Purpose of Disbursement REIMB FM 4TH QTR

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 22 / 2014

Amount of Each Disbursement this Period: 800.00

Transaction ID : SB17.9046

B. INSTA STOR INC

Full Name (Last, First, Middle Initial)
Mailing Address 1516 W MARINA DR

City MOSES LAKE State WA Zip Code 98837

Purpose of Disbursement REIMB FM 3RD QTR

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 22 / 2014

Amount of Each Disbursement this Period: 400.00

Transaction ID : SB17.8960

C. JACOBS MEDIA

Full Name (Last, First, Middle Initial)
Mailing Address 30300 TELEGRAPH RD, STE 240

City BINGHAM FARMS State MI Zip Code 48025

Purpose of Disbursement 3-STATION RADIO ADS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 24 / 2014

Amount of Each Disbursement this Period: 800.00

Transaction ID : SB17.9229

SUBTOTAL of Disbursements This Page (optional) 2000.00

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 69 OF 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KAPP/KVEW		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address PO 1749		Amount of Each Disbursement this Period 4250.00 Transaction ID : SB17.9400
City YAKIMA	State WA	
Zip Code 98907	Purpose of Disbursement TV 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) B. KCYU TV FOX 41		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 3804 KERN WAY, #B		Amount of Each Disbursement this Period 4679.50 Transaction ID : SB17.9077
City YAKIMA	State WA	
Zip Code 98902	Purpose of Disbursement ADVERTISING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. KIMA/KEPR TV		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 2807 W LEWIS ST		Amount of Each Disbursement this Period 5104.25 Transaction ID : SB17.9513
City PASCO	State WA	
Zip Code 99301	Purpose of Disbursement TV 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:	

SUBTOTAL of Disbursements This Page (optional).....	14033.75
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 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KIMA/KEPR TV			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 2807 W LEWIS ST			Amount of Each Disbursement this Period 1785.00 Transaction ID : SB17.9786
City PASCO	State WA	Zip Code 99301	
Purpose of Disbursement TV ADS		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. KNAO/KNDU			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 3312 W KENNEWICK AVE			Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.9236
City KENNEWICK	State WA	Zip Code 99336	
Purpose of Disbursement TV ADS		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. KONA AM-FM RADIO			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 2823 W LEWIS ST			Amount of Each Disbursement this Period 2444.00 Transaction ID : SB17.9233
City PASCO	State WA	Zip Code 99301	
Purpose of Disbursement RADIO ADS		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)	9229.00
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 71 OF 85			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KSEM, INC		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 2241 W MAIN ST		Amount of Each Disbursement this Period 1219.50 Transaction ID : SB17.9079
City MOSES LAKE	State WA	
Zip Code 98837	Purpose of Disbursement RADIO 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	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. L2, INC		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 2500 116TH AVE NE		Amount of Each Disbursement this Period 7154.70 Transaction ID : SB17.9517
City BELLEVUE	State WA	
Zip Code 98004	Purpose of Disbursement MAILING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. Mr. JOHN LEE		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 2600 W 34TH AVE		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.9060
City KENNEWICK	State WA	
Zip Code 99337	Purpose of Disbursement In-kind - COPY OF US CONSTITUTION AT FUNDRAISER	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).....	8774.20
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 85		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR QWIK'S COUNTRY, INC		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address PO BOX 8		Amount of Each Disbursement this Period 82.16 Transaction ID : SB17.8789
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 10 / 24 / 2014
Mailing Address PO BOX 8		Amount of Each Disbursement this Period 47.27 Transaction ID : SB17.9241
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 10 / 30 / 2014
Mailing Address PO BOX 8		Amount of Each Disbursement this Period 59.72 Transaction ID : SB17.9623
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).....	189.15
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 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR QWIK'S COUNTRY, INC		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address PO BOX 8		Amount of Each Disbursement this Period 72.10
City ELTOPIA	State WA	
Zip Code 99330	Purpose of Disbursement FUEL	Transaction ID : SB17.9740
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. MS YAKIMA COUNTY SCHOLARSHIP PGM		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 8505 GARDEN AVE		Amount of Each Disbursement this Period 250.00
City YAKIMA	State WA	
Zip Code 98908	Purpose of Disbursement PAGEANT	Transaction ID : SB17.9264
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" 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. NATIONAL COLOR GRAPHICS INC		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 25 W BOONE		Amount of Each Disbursement this Period 5283.91
City SPOKANE	State WA	
Zip Code 99201	Purpose of Disbursement FUNDRAISING LTRS & PRINTING	Transaction ID : SB17.8841
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).....	5606.01
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 85			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NATIONAL COLOR GRAPHICS INC			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 25 W BOONE			Amount of Each Disbursement this Period 18374.65 Transaction ID : SB17.9811
City SPOKANE	State WA	Zip Code 99201	
Purpose of Disbursement FUNDRAISING MAILING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. NATIONAL COLOR GRAPHICS INC			Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address 25 W BOONE			Amount of Each Disbursement this Period 2171.82 Transaction ID : SB17.9818
City SPOKANE	State WA	Zip Code 99201	
Purpose of Disbursement CAMPAIGN FUNDRAISING MAILING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. NCIDATA.COM			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 700 OKOMA DR			Amount of Each Disbursement this Period 940.00 Transaction ID : SB17.9624
City OMAK	State WA	Zip Code 98841	
Purpose of Disbursement BROADCASTING		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).....	21486.47
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 85			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NO 9 HAY TRADING CO		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 2550 HUNGRY JUNCTION RD		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.8816
City ELLENSBURG	State WA	
Zip Code 98926	Purpose of Disbursement REIMB FM 3RD QTR	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. NOW AMFOUND GEOGRAPHICS LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address PO BOX 2906		Amount of Each Disbursement this Period 260.00 Transaction ID : SB17.9816
City KIRKLAND	State WA	
Zip Code 98083	Purpose of Disbursement PRECINCT ANALYSIS & DOORBELLING	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. PARR LUMBER CO		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 2105 N COMMERCIAL AVE		Amount of Each Disbursement this Period 174.85 Transaction ID : SB17.8767
City PASCO	State WA	
Zip Code 99301	Purpose of Disbursement SIGNAGE MATERIAL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1434.85
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 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PHIPPS FARMS LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 1600 RANGER DR		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.9047
City MESA	State WA	
Zip Code 99343	Purpose of Disbursement REIMB FM 4TH QTR	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. Mr. STEPHEN PIDGEON		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 3002 COLBY AVE, STE 306		Amount of Each Disbursement this Period 7900.00 Transaction ID : SB17.9569
City EVERETT	State WA	
Zip Code 98201	Purpose of Disbursement LEGAL REPRESENTATION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. Mr. SAM PIMM		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 1155 15th St NW		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.9618
City WASHINGTON	State DC	
Zip Code 20005	Purpose of Disbursement PROFESSIONAL SVCES	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).....	10650.00
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 77 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PRESSCATS.COM		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 18219 N LIDGERWOOD		Amount of Each Disbursement this Period 890.87 Transaction ID : SB17.9620
City COLBERT	State WA Zip Code 99005	
Purpose of Disbursement PRINTING	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. RADIO TRI-CITIES		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 4305 W 24TH AVE, STE 200		Amount of Each Disbursement this Period 1920.00 Transaction ID : SB17.9511
City KENNEWICK	State WA Zip Code 99338	
Purpose of Disbursement RADIO ADS	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. RADIO YAKIMA		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 17 N 3RD ST, #103		Amount of Each Disbursement this Period 985.00 Transaction ID : SB17.9082
City YAKIMA	State WA Zip Code 98901	
Purpose of Disbursement RADIO ADS	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).....	3795.87
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 85	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. RED LION HOTEL PASCO		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 2520 N 20TH AVE		Amount of Each Disbursement this Period 1135.07
City PASCO	State WA Zip Code 99301	
Purpose of Disbursement ELECTION NIGHT PARTY	Candidate Name	Transaction ID : SB17.9799
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. RON ASMUS HOMES INC		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 2810 W CLEARWATER AVE, STE 102		Amount of Each Disbursement this Period 2500.00
City KENNEWICK	State WA Zip Code 99336	
Purpose of Disbursement REIMB FM 4TH QTR	Candidate Name	Transaction ID : SB17.9075
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. SALT INSTITUTE		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address PO BOX 117		Amount of Each Disbursement this Period 500.00
City NORTHPORT	State WA Zip Code 99157	
Purpose of Disbursement REIMB IN 4TH QTR	Candidate Name	Transaction ID : SB17.9323
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	4135.07
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 85			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. DOUGLAS SIMPSON		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 6010 WYNN JONES RD E		Amount of Each Disbursement this Period 18940.16 Transaction ID : SB17.9568
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) B. SMI GROUP XII, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 1030 BATTELLE BLVD, #102		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.8814
City RICHLAND	State WA	
Zip Code 99354	Purpose of Disbursement REIMB FM 3RD QTR	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. SMI GROUP XV, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 1030 BATTELLE BLVD, #102		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.8815
City RICHLAND	State WA	
Zip Code 99354	Purpose of Disbursement REIMB FM 3RD QTR	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).....	23940.16
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. LARRY STICKNEY			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014	
Mailing Address 978 WESTOVER RD			Amount of Each Disbursement this Period 5000.00	
City COLVILLE	State WA	Zip Code 99114	Transaction ID : SB17.9723	
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. TOWNSQUARE MEDIA			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014	
Mailing Address 240 GREENWICH AVE			Amount of Each Disbursement this Period 1978.80	
City GREENWICH	State CT	Zip Code 06830	Transaction ID : SB17.9231	
Purpose of Disbursement RADIO 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. VALLEY HAY, INC			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014	
Mailing Address 2870 MIDVALE RD			Amount of Each Disbursement this Period 250.00	
City MABTON	State WA	Zip Code 98935	Transaction ID : SB17.9399	
Purpose of Disbursement REIMB FM 3RD QTR		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).....	7228.80
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 85			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VOSSLER MEDIA GROUP		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 11730 118th Ave NE		Amount of Each Disbursement this Period 540.00 Transaction ID : SB17.9784
City KIRKLAND	State WA	
Zip Code 98034	Purpose of Disbursement WEBSITE	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. WALMART SUPERCENTER		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 4820 N RD 68		Amount of Each Disbursement this Period 98.72 Transaction ID : SB17.9518
City PASCO	State WA	
Zip Code 99301	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 <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 11 / 04 / 2014
Mailing Address 4820 N RD 68		Amount of Each Disbursement this Period 14.19 Transaction ID : SB17.9741
City PASCO	State WA	
Zip Code 99301	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 <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	652.91
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 85		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WORSHAM FARMS LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 2690 ST RT 17		Amount of Each Disbursement this Period 1500.00
City MESA State WA Zip Code 99343	Category/Type	
Purpose of Disbursement REIMB IN 4TH QTR		Transaction ID : SB17.9653
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	Category/Type	
Purpose of Disbursement		
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	Category/Type	
Purpose of Disbursement		
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).....	1500.00
TOTAL This Period (last page this line number only).....	219129.29

**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 85	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
CLINT DIDIER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CLINT DIDIER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address PO BOX 157		Amount of Each Disbursement this Period 10000.00 Transaction ID : SB19A.9756
City ELTOPIA State WA Zip Code 99301	Purpose of Disbursement LOAN REPAYMENT	
Candidate Name	Category/Type	
Office Sought: <input checked="" 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: WA District: 04		

Full Name (Last, First, Middle Initial) B. CLINT DIDIER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address PO BOX 157		Amount of Each Disbursement this Period 20000.00 Transaction ID : SB19A.9757
City ELTOPIA State WA Zip Code 99301	Purpose of Disbursement LOAN REPAYMENT	
Candidate Name	Category/Type	
Office Sought: <input checked="" 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: WA District: 04		

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	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	30000.00
TOTAL This Period (last page this line number only).....	30000.00

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4244

CLINT DIDIER FOR CONGRESS

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

CLINT DIDIER FOR CONGRESS

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
PO BOX 157

City State ZIP Code
ELTOPIA WA 99301

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

TERMS

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

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

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

SUBTOTALS This Period This Page (optional)..... ▶ [] 0.00
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	20000.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 31 / Y 2014 Y	M M / D D / Y Y Y Y	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).....	[] 0.00
TOTALS This Period (last page in this line only).....	[] 0.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	