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FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3 For Ai	n Authorized (	Committee			Office Use Only
NAME OF TYPE OR PF     COMMITTEE (in full)	RINT ▼	Example: If typin over the lines.	g, type	12FE4M5	
Moore for Alaska					
. 2440 5 7111	DOD DOAD				
ADDRESS (number and street)	DOR ROAD				
Check if different					
than previously reported. (ACC)	:			AK !	99507
2. FEC IDENTIFICATION NUMBER ▼	CITY	, 🛦		STATE A	ZIP CODE A STATE ▼ DISTRICT
C C00520544	3. IS THI REPOR		OR	AMEND (A)	
4. TYPE OF REPORT (Choose One)	(b) 12-Day	PRE-Election Repo	ort for the:		
(a) Quarterly Reports:	(*, .2 2 4)			0.505.5051./1	00) Duraf (10D)
April 15 Quarterly Report (Q1)		Primary (12P	)	General (1	2G) Runoff (12R)
July 15 Quarterly Report (Q2)		Convention (	12C)	Special (1	2S)
October 15 Quarterly Report (Q3	) Electio	on on	D D /	Y " Y " Y	in the State of
January 31 Year-End Report (YE)	(c) 30-Day	POST-Election Rep	oort for the:		
		General (30G	i)	Runoff (30	Special (30S)
Termination Report (TER)	Electio	on on	D D /	Y	in the State of
5. Covering Period 04 01	/ Y Y Y Y 2014	through	м м 05	/ 13 /	Y Y Y Y Y 2014
I certify that I have examined this Report and	d to the best of r	my knowledge and i	belief it is tr	rue, correct and	d complete.
Type or Print Name of Treasurer MICHELE	Vasquez				
Signature of Treasurer MICHELE Vasquez		[Electronically l	Filed] [	Date 05	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, erroneous, or incom	nplete information	may subject the per	son signing	this Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3 (Revised 02/2003)

#### **SUMMARY PAGE**

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 28

Write or Type Committee Name

N	100	re '	f∩r	Α	lasl	(a
ıν	טטוי	10	ıvı	-	เฉงเ	ľ

05 13 2014 01 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 2225.00 19521.50 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 2225.00 19521.50 (subtract Line 6(b) from Line 6(a)) ...... Net Operating Expenditures (a) Total Operating Expenditures 4041.69 57103.12 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 4041.69 57103.12 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 0.00 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 40123.62 Schedule C and/or Schedule D).....

#### For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

PAGE 3 / 28

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Moore	for	Alaska
MOOIC	101	/ liasila

04 2014 05 2014 01 13 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 2225.00 9785.00 (i) Itemized (use Schedule A)..... 0.00 9736.50 (ii) Unitemized ..... (iii) TOTAL of contributions 2225.00 19521.50 from individuals ..... 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 0.00 0.00 The Candidate..... TOTAL CONTRIBUTIONS (other than loans) 2225.00 19521.50 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES ..... 13. LOANS: (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 0.00 41200.00 (b) All Other Loans..... TOTAL LOANS 0.00 41200.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) ..... 15. OTHER RECEIPTS 0.00 8.00 (Dividends, Interest, etc.) ..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 2225.00 60729.50 (Carry Total to Line 24, page 4).....

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

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		II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPI	ERATING EXPENDITURES	4041.69	57103.12
18.		ANSFERS TO OTHER THORIZED COMMITTEES	0.00	0.00
19.	LOA	AN REPAYMENTS:		
	(a)	Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b)	Of All Other Loans	1076.38	1076.38
	(c)	TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	1076.38	1076.38
20.	REF	FUNDS OF CONTRIBUTIONS TO:		
	(a)	Individuals/Persons Other Than Political Committees	0.00	0.00
	(b)	Political Party Committees	0.00	0.00
	(c)	Other Political Committees (such as PACs)	0.00	0.00
	(d)	TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTI	HER DISBURSEMENTS	0.00	3000.00
22.		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	5118.07	61179.50
		III. CASH SU	MMARY	
23.	CAS	SH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	2893.07
24	TO	TAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	2225.00
25.	SUI	BTOTAL (add Line 23 and Line 24)		5118.07
26.	TO	TAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	5118.07
27.		SH ON HAND AT CLOSE OF REPORTING	G PERIOD	0.00

## SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE	NUMBER:	PAGE	5 OF	28
(check only	one)			
X <sub>11a</sub>	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)

$\rangle$	NAME OF COMMITTEE (In Full)  Moore for Alaska		
Δ.	Full Name (Last, First, Middle Initial)  Matthew E Moore  Mailing Address 7035 Tulugak Cir		Date of Receipt
	Walling Address 7035 Tulugak Cir		04 24 _2014 _
	City Anchorage	Transaction ID : VN8V1CQBXH0	
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
	Name of Employer SELF- MEDICAL PRACTICE SOLUTIONS	Occupation BUSINESS CONSULTANT	2100.00
	Receipt For: 2014 Primary General Other (specify) Debt Primary 2014	Election Cycle-to-Date 2100.00	* Earmarked Contribution: See Below
В.	Full Name (Last, First, Middle Initial)  Matthew E Moore		Date of Receipt
	Mailing Address 7035 Tulugak Cir		05 12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Anchorage	State Zip Code AK 99507-1264	Transaction ID: VN8V1CQBXF5
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
	Name of Employer SELF- MEDICAL PRACTICE SOLUTIONS	Occupation BUSINESS CONSULTANT	125.00
	Receipt For: 2014 Primary General Other (specify) Debt Primary 2014	Election Cycle-to-Date 2225.00	* Earmarked Contribution: See Below
	Full Name (Last, First, Middle Initial)		Date of Receipt
<b>O</b> .	Mailing Address		M M / D D / Y Y Y Y
	City	State Zip Code	
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer	Occupation	
	Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
s	SUBTOTAL of Receipts This Page (optional)	2225.00	
Т	OTAL This Period (last page this line number of	2225.00	

1mage# 14941208609 PAGE 6 / 28

: 97 'A = G7 9 @ G5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: SA11AI

Transaction ID: VN8V1CQBXH0

Payment to NGP. Final Invoice. Contribution/loan made to offset payment to NGP via personal CC.

Form/Schedule: SA11AI

Transaction ID: VN8V1CQBXF5

CC Payment to campaign to offset NGP Expense to re open Data base for final filing

### S

	-				
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		-	Use separate sch for each category Detailed Summar	nedule(s) ( of the	FOR LINE NUMBER: PAGE 7 OF 28 (check only one)    X   17
					erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  Moore for Alaska				
Α.	Full Name (Last, First, Middle Initial) Christensen & Associates				Date of Disbursement
	Mailing Address 209 Pennsylvania Ave	SE			04 02 2014
	City Washington	State DC	Zip Code 20003-1107		Amount of Each Disbursement this Period
	Purpose of Disbursement Consultant			003	1750.00  Transaction ID: VN7VS9SC094
	Candidate Name		0044	Category/ Type	
	Office Sought: House Senate President	Disbursement For X Primary Other (s	General		
В.	State: District:  Full Name (Last, First, Middle Initial)  FACEBOOK ADVERTISIN  Mailing Address 156 University Ave	IG			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Palo Alto	State CA	Zip Code 94301-1688		Amount of Each Disbursement this Period
	Purpose of Disbursement Facebook Advertising			001	19.85 Transaction ID: VN7VS9S2JP5
	Candidate Name	Diah		Category/ Type	
	Office Sought:  House Senate President State: District:	Disbursement For Primary Other (s	General		
C.	Full Name (Last, First, Middle Initial) WELLS FARGO				Date of Disbursement
	Mailing Address 301 W Northern Lights Blvd				04 02 7 2014
	City Anchorage	Amount of Each Disbursement this Period			
	Purpose of Disbursement Bankcard-Merchant Fees  Candidate Name			001 Category/	Transaction ID : VN7VS9S2JM9
	Office Sought:  House Senate President State: District:	Disbursement For Primary Other (s	General	Type	
					4705.07

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

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

### S

		B (FEC Form	-	Use separate sch for each category Detailed Summar	nedule(s) / of the	FOR LINE NUMBER: PAGE 8 OF 28 (check only one)    X   17
						erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	Moore for A					
Α.	Full Name (Last NGP-VAN,	, First, Middle Initial) , Inc.				Date of Disbursement
	Mailing Address	1101 15th St NW Ste 500				04 24 2014
	City Washington		State DC	Zip Code 20005-5006		Amount of Each Disbursement this Period
		R CAMPAIGN OVERHE	EAD		001	Z100.00 Transaction ID: VN7VS9SBR47
	Candidate Name				Category/ Type	
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General		
_	State:	District:				
В.	NGP-VAN	1101 15th St NW				Date of Disbursement  M M M / D D / Y M Y M Y M Y M Y M Y M Y M Y M Y M Y
	City	Ste 500	State	Zip Code		
	Washington		DC	20005-5006		Amount of Each Disbursement this Period
	Purpose of Disb open acct to file	oursement e final			001	125.00 Transaction ID : VN7VS9SBQZ7
	Candidate Name	е			Category/ Type	
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General		
	State:	District:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Full Name (Last	, First, Middle Initial)				5
C.						Date of Disbursement
	Mailing Address	;				M M / D D / Y Y Y
	City		State Zi <sub>l</sub>	p Code		Amount of Each Disbursement this Period
	Purpose of Disb	oursement				, ,
	Candidate Name	e			Category/ Type	
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General	21.5	
	State:	District:				
						2225.00

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

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

4010.87

**1mage# 14941208612** PAGE 9 / 28

: 97 'A = G7 9 @ G5 B9 CI G'H9 LH F9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H= C B

Form/Schedule: SB17

Transaction ID: VN7VS9SBR47

Pay NGP Invoice outstanding campaign debt.

Form/Schedule: SB17

Transaction ID: VN7VS9SBQZ7

Reopen account to file transactions and file final report for the committee.

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 OF 28 (check only one)
	ny information copied from such Reports and Statements me for commercial purposes, other than using the name and	lay not be sold or used by a	
	NAME OF COMMITTEE (In Full)  Moore for Alaska	address of any political confin	intee to solicit contributions from such committee.
<b>A.</b>	Full Name (Last, First, Middle Initial)  Matthew E Moore  Mailing Address 7035 Tulugak Cir  City State Anchorage AK  Purpose of Disbursement Partial loan repayment  Candidate Name  Office Sought: House Senate President  President District:	General	
3.	Full Name (Last, First, Middle Initial)  Mailing Address		Date of Disbursement
	City State  Purpose of Disbursement	Zip Code	Amount of Each Disbursement this Period
	Candidate Name	Catego Type	
	Office Sought:  House Senate President  State:  Disbursement For Primary Other (s	General	
Э.	Full Name (Last, First, Middle Initial)  Mailing Address		Date of Disbursement
		ip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement  Candidate Name	Catego	
	Office Sought:  House Disbursement For Senate President Other (s	General	
_	State: District:		1076.38
3	UBTOTAL of Disbursements This Page (optional)		

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

1076.38

**1mage# 14941208614** PAGE 11 / 28

: 97 'A = G7 9 @ G B9 CI G'H9 LH F 9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F '+ H9 A = N5 H= C B

Form/Schedule: SB19B

Transaction ID: VN7VS9SBRA4

Partial Loan Repayment - zero account balance

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 12

	13a
X	13b

OANS			Detailed Summary Pa		k only one)	13a <b>X</b> 13b
AME OF COMMITTEE (In Full)			Transa	action ID : VN8	V1B45AQ0L	
Moore for Alaska						
LOAN SOURCE Full Name (Last, Matthew E Moore	First, Middle Initial	)	[PERSONAL FUNDS]	Election:  Primar  Genera		
Mailing Address 7035 Tulugak Cir				⊣ ∟	(specify) ▼	_
City	State	ZIP Cod	de			
Anchorage	AK	99507-	264			
Original Amount of Loan	Cumulat	ive Payment To	Date Ba	lance Outstand	ding at Close of	f This Period
100	0.00	, ,	0.00			100.00
Date Incurred  M 06 / Date Incurred  21 / Y 2013	Y M M /	Date Due	Interest Ra	ne	Secui	red:
List All Endorsers or Guarantors	(if any) to Loan S	OURCA		70	(арг) ү	<u>es</u> No
Full Name (Last, First, Middle III)	· • • • • • • • • • • • • • • • • • • •	odroc	Name of Employer			
Mailing Address			Occupation			
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	,	7	
2. Full Name (Last, First, Middle In	itial)		Name of Employer			
Mailing Address			Occupation			
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	7	7	
3. Full Name (Last, First, Middle In	itial)		Name of Employer			
Mailing Address			Occupation			
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	7	,	
4. Full Name (Last, First, Middle In	itial)		Name of Employer			
Mailing Address			Occupation			
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	7	7	
SUBTOTALS This Period This Page (o	optional)		······			100.00
TOTALS This Period (last page in this	line only)			,		
Carry outstanding balance only to LII	NE 3. Schedule D.	for this line. If I	no Schedule D. carry for	rward to appr	opriate line of	Summary.

**1mage# 14941208616** PAGE 13 / 28

#### : 97 'A = G7 9 @ G B9 C I G'H9 L H'F 9 @ 5 H9 8 'HC' 5 'F 9 D C F H Z G7 < 98 I @ 'C F' + H9 A = N 5 H = C B

Form/Schedule: SC/10

Transaction ID : VN8V1B45AQ0L

Flling Fee -AK Division of Elections Candidate Loan

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

14

	13a
<b>Y</b>	13h

DANS			for each category of t Detailed Summary Pag	
AME OF COMMITTEE (In Ful	l)		Transac	ction ID : VN8V1B45B92L
LOAN SOURCE Full Nam Matthew E Moore	e (Last, First, Middle	· Initial)	[PERSONAL FUNDS]	Election: 2013  Primary
Mailing Address 7035 Tulugak Cir				General Other (specify) ▼
City	St	ate ZIP Co	de	
Anchorage		AK 99507-	1264	
Original Amount of Loan	1000.00	Cumulative Payment To	Date Bala	ance Outstanding at Close of This Period
TERMS  Date Incurre	Ž013 Y	Date Due	Interest Rate	
List All Endorsers or Gua  1. Full Name (Last, First, I		oan Source	Name of Employer	
Mailing Address			Occupation	
City	State 2	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 9
2. Full Name (Last, First, M	fliddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7 7 7
3. Full Name (Last, First, M	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, M	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 9
SUBTOTALS This Period This	Page (optional)		······ •	1000.00
FOTALS This Period (last pag	e in this line only)			, , , , , , , , ,
Carry outstanding balance or	nly to LINE 3, Sched	ule D, for this line. If	no Schedule D, carry for	ward to appropriate line of Summary.

**1mage# 14941208618** PAGE 15 / 28

: 97 'A = G7 9 @ G5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: SC/10

Transaction ID: VN8V1B45B92L

CANDIDATE LOAN TO CAMPAIGN

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 16

	13a
X	13b

DANS			Detailed Summary F	
AME OF COMMITTEE (In Fu	III)		Trans	action ID : VN8V1B45B50L
LOAN SOURCE Full Nar Matthew E Moore	ne (Last, First, Mid	dle Initial)	[PERSONAL FUNDS]	Election: 2013  Primary  General
Mailing Address 7035 Tulugak Cir				Other (specify) ▼
City		State Z	IP Code	
Anchorage		AK 9	9507-1264	
Original Amount of Loan		Cumulative Payme	ent To Date Ba	alance Outstanding at Close of This Period
, , ,	6000.00	,	0.00	6000.00
Date Incur	red Y 2013 Y	Date	e Due Interest Ra	one % (apr)
List All Endorsers or Gu	arantors (if any) to	Loan Source		Yes No
1. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	y
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:	9
4. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	, , , , , , , , ,
UBTOTALS This Period Thi				6000.00

1mage# 14941208620 PAGE 17 / 28

: 97 'A = G7 9 @ G5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: SC/10

Transaction ID: VN8V1B45B50L

CANDIDATE LOAN TO CAMPAIGN

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

18

	13a
×	13b

OANS		for each category of the Detailed Summary Pag	
NAME OF COMMITTEE (In Full)  Moore for Alaska		Transac	tion ID : VN8V1B45AW9L
LOAN SOURCE Full Name (Last, First, Matthew E Moore  Mailing Address 7035 Tulugak Cir	1iddle Initial)	[PERSONAL FUNDS]	Election: 2013  X Primary General Other (specify) ▼
City	State ZIP Co	de	
Anchorage	AK 99507-	1264	
Original Amount of Loan 5000.00	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Period
Date Incurred  M09 / D09 / Y Z013 Y	Date Due	Interest Rate	
List All Endorsers or Guarantors (if any)  1. Full Name (Last, First, Middle Initial)	to Loan Source	Name of Employer	
Mailing Address		Occupation  Amount	
City State	ZIP Code	Guaranteed Outstanding:	2
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 1 8 1
SUBTOTALS This Period This Page (optional	•		5000.00
Carry outstanding balance only to LINE 3, S			vard to appropriate line of Summarv.

**1mage# 14941208622** PAGE 19 / 28

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: SC/10

Transaction ID: VN8V1B45AW9L

Candidate Loan to Campaign

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 20

	13a
$oldsymbol{ abla}$	13h

OANS		for each category of the Detailed Summary Page (check only one) 13a
IAME OF COMMITTEE (In Fu	ıll)	Transaction ID : VN8V1BD6YV3L
LOAN SOURCE Full Nam Matthew E Moore	ne (Last, First, Middle Initial)	Election: 2013  Primary  General
Mailing Address 7035 Tulugak Cir		Other (specify) ▼
City	State ZIP	Code
Anchorage	AK 99	507-1264
Original Amount of Loan	Cumulative Paymen	t To Date Balance Outstanding at Close of This Period
2 2	5000.00	0.00 5000.00
TERMS  Date Incurr	ped Date I	Due Interest Rate Secured:  y y none none % (apr)
List All Endorsers or Gu	arantors (if any) to Loan Source	Yes No
Full Name (Last, First,	· · · · · · · · · · · · · · · · · · ·	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 Thi	s Page (optional)	5000.00
FOTALS This Period (last pa	ge in this line only)	
Carry outstanding balance of	only to LINE 3, Schedule D, for this line	e. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) FOR LINE NUMBER:

PAGE 21

OANS			for each category of the Detailed Summary Page	(check only one) 13a
AME OF COMMITTEE (In Full)  Moore for Alaska			Transactio	on ID : VN8V1BP5TS6L
LOAN SOURCE Full Name (Last Matthew E Moore	st, First, Middle	Initial)		Election: 2013  Primary  General
Mailing Address 7035 Tulugak Cir				Other (specify) ▼
City	St	ate ZIP Cod	e	
Anchorage	,	AK 99507-12	264	
Original Amount of Loan	C	Cumulative Payment To D	Date Balanc	e Outstanding at Close of This Period
4	000.00	2 2	0.00	4000.00
TERMS  Date Incurred		Date Due	Interest Rate	Secured:
M 12 Date incurred	3 Y	M / D D / Y	none none	% (apr) Yes No
List All Endorsers or Guaranto	rs (if any) to L	oan Source		100 110
1. Full Name (Last, First, Middle	e Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State		Guaranteed Outstanding:	
2. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIF COUC	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	e (optional)		······ }	4000.00
FOTALS This Period (last page in t	this line only)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	LINE 2 Cabadi	ulo D for this line. If n	a Cabadula D. aawu fawuu	al to annualista line of Community

Use separate schedule(s)

FOR LINE NUMBER:

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OANS		for each category of the Detailed Summary Page	
IAME OF COMMITTEE (In Fu	ıll)	Transacti	ion ID : VN8V1BTBV26L
Moore for Alaska			
LOAN SOURCE Full Nam	ne (Last, First, Middle Initial)		Election: 2013
Matthew E Moore			Primary General
Mailing Address 7035 Tulugak Cir			Other (specify) ▼
City	State ZIF	P Code	
Anchorage	AK 99	507-1264	
Original Amount of Loan	Cumulative Paymer	nt To Date Balan	nce Outstanding at Close of This Period
	5000.00	0.00	5000.00
Date Incurr	ed Date	Due Interest Rate	Secured:
List All Endorsers or Gus	arantors (if any) to Loan Source		Yes No
Full Name (Last, First,	* **	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9
2. Full Name (Last, First, I	Viiddle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, I	Viiddle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, I	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	9 9
SUBTOTALS This Period Thi	s Page (optional)	· [	5000.00
FOTALS This Period (last page	ge in this line only)		, , , , , , , , ,
Carry outstanding balance o	nly to LINE 3, Schedule D, for this line	e. If no Schedule D, carry forwa	ard to appropriate line of Summary.

Use separate schedule(s)

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OANS			for each category Detailed Summary	of the   (cha	eck only one)	13a <b>X</b> 13b
IAME OF COMMITTEE (In Full)  Moore for Alaska			Trar	nsaction ID : V	N8V1C8M5E3L	1, 1,
LOAN SOURCE Full Name (L	ast. First. Midd	dle Initial)		Election:	2013	
Matthew E Moore	,	,		Prim	ary	
Mailing Address 7035 Tulugak Cir				Othe	r (specify) 🔻	
City	;	State ZIP Co	de			
Anchorage		AK 99507-	1264			
Original Amount of Loan	4000.00	Cumulative Payment To	Date 0.00	Balance Outsta	anding at Close o	f This Period
9 9	4000.00		0.00		7	000.00
Date Incurred  Mo1 <sup>M</sup> / D30 <sup>D</sup> / Y Ž	01 <b>4</b>	Date Due	HUHE	none	Secu	red:
List All Endorsers or Guarant	tors (if anv) to	Loan Source				<u>res No</u>
1. Full Name (Last, First, Mide			Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:	7	7	
2. Full Name (Last, First, Midd	le Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:	7	7	
3. Full Name (Last, First, Midd	le Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:	-,	7	
4. Full Name (Last, First, Midd	le Initial)		Name of Employer			
Mailing Address			Occupation			
			Amount			-
City	State	ZIP Code	Guaranteed Outstanding:	7	7	
SUBTOTALS This Period This Pa	ge (optional)		·····	7	4	000.00
TOTALS This Period (last page in	this line only)		······			- M
Carry outstanding balance only t	o LINE 3, Sche	edule D, for this line. If	no Schedule D, carry	forward to ap	propriate line of	Summary.

Use separate schedule(s)

FOR LINE NUMBER:

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OANS		for each category of the Detailed Summary Page	
IAME OF COMMITTEE (In Fu	II)	Transac	ction ID : VN8V1CM1A67L
Matthew E Moore	ne (Last, First, Middle Initial)	[PERSONAL FUNDS]	Election: 2014  Primary  General
Mailing Address 7035 Tulugak Cir			Other (specify)
City	State	ZIP Code	
Anchorage	AK	99507-1264	
Original Amount of Loan	Cumulative Payr		ance Outstanding at Close of This Period
2	2100.00	1076.38	1023.62
TERMS  Date Incurre	ed Da	ate Due Interest Rate	
List All Endorsers or Gua	arantors (if any) to Loan Source		Yes No
Full Name (Last, First,		Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9
2. Full Name (Last, First, I	vliddle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First, I	vliddle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	g g
4. Full Name (Last, First, I	vliddle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 1 1
SUBTOTALS This Period This	s Page (optional)	·····	1023.62
FOTALS This Period (last page	ge in this line only)	·····	, ,
Carry outstanding balance o	nly to LINE 3, Schedule D, for this	line. If no Schedule D, carry forv	ward to appropriate line of Summary.

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#### : 97 'A = G7 9 @ G B9 C I G'H9 L H'F 9 @ 5 H9 8 'HC' 5 'F 9 D C F H Z G7 < 98 I @ 'C F' + H9 A = N 5 H = C B

Form/Schedule: SC/10

Transaction ID: VN8V1CM1A67L

PAYMENT OF NGP VAN DEBT BY CANDIDATE

Use separate schedule(s)

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OANS			for each category of the Detailed Summary Page (check only one)  13a
AME OF COMMITTEE (In Full) Moore for Alaska			Transaction ID: VN8V1CAP0G9L
LOAN SOURCE Full Name	(Last, First, Mid	dle Initial)	Election: 2013
Matthew E Moore		·	Primary General
Mailing Address 7035 Tulugak Cir			Other (specify) ▼
City		State ZIP Co	ode
Anchorage		AK 99507	-1264
Original Amount of Loan		Cumulative Payment To	
	4000.00	9	0.00 4000.00
TERMS  Date Incurred	ž014 <sup>Y</sup>	Date Due	none % (apr)
List All Endorsers or Guara	antors (if any) to	Loan Source	Yes No
1. Full Name (Last, First, M			Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Mi	ddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Mi	ddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Mi	ddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This	Page (optional)		
FOTALS This Period (last page	in this line only)		
	y to LINE 3, Sch	edule D, for this line. If	no Schedule D, carry forward to appropriate line of Summary.

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DANS			Detailed Summary		(check only one)	X	13a 13b
AME OF COMMITTEE (In Fu	ıll)		Tran	saction	ID : VN8V1CG1857L		
LOAN SOURCE Full Nar Matthew E Moore	ne (Last, First, Mic	dle Initial)		Ele	ection: 2014 Primary General		
Mailing Address 7035 Tulugak Cir					Other (specify) ▼		
City		State ZIP 0	Code				
Anchorage		AK 9950	7-1264				
Original Amount of Loan		Cumulative Payment	To Date E	Balance	Outstanding at Close of	This	Perio
2	3000.00		0.00		30	0.00	0
Date Incur	red Y Ž014 Y	Date Du	V V V V	Rate	Secur	]	$\times$
List All Endorsers or Gu	arantors (if any) to	Loan Source			Yı	es	No
1. Full Name (Last, First,	Middle Initial)		Name of Employer				
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:	- 7	y		
2. Full Name (Last, First,	Middle Initial)		Name of Employer				
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:	7	7		
3. Full Name (Last, First,	Middle Initial)		Name of Employer				
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:	- ,	y		
4. Full Name (Last, First,	Middle Initial)		Name of Employer				
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:				
UBTOTALS This Period The					30	0.00	0

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DANS			for each category of the Detailed Summary Page (check only one) 13a
AME OF COMMITTEE (In Full)  Moore for Alaska			Transaction ID : VN8V1CG18A7L
LOAN SOURCE Full Name	(Last, First, Mic	Idle Initial)	Election: 2014
Matthew E Moore			Primary  General
Mailing Address 7035 Tulugak Cir			Other (specify) ▼
City		State ZIP C	ode
Anchorage		AK 99507	7-1264
Original Amount of Loan	2000.00	Cumulative Payment To	Date  Balance Outstanding at Close of This Period  0.00  2000.00
TERMS  Date Incurred		Date Due	e Interest Rate Secured:
	ž014 <sup>Y</sup>	M M / D D / Y	none % (apr) Yes N
List All Endorsers or Guarai		o Loan Source	
1. Full Name (Last, First, Mi	ddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Mid	dle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Mid	dle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Mid	ldle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This P	age (optional)		
TOTALS This Period (last page	in this line only	·)	40123.62
	to LINE 3, Sch	nedule D, for this line. If	f no Schedule D, carry forward to appropriate line of Summary