

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Walden for Congress

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

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 534024.61 | 3193554.2 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0 | 0 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 534024.61 | 3193554.2 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 319079.61 | 2548655.86 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 435.2 | 25799.67 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 318644.41 | 2522856.19 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 1245712.62 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0 | |

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Walden for Congress

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

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|---------------------------------------|--|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 166840.2 | 1046618.01 |
| (ii) Unitemized..... | 24581.59 | 252083.63 |
| (iii) TOTAL of contributions from individuals ▶ | 191421.79 | 1298701.64 |
| (b) Political Party Committees..... | 0 | 0 |
| (c) Other Political Committees (such as PACs)..... | 342602.82 | 1894852.56 |
| (d) The Candidate..... | 0 | 0 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 534024.61 | 3193554.2 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0 | 0 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0 | 0 |
| (b) All Other Loans..... | 0 | 0 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0 | 0 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 435.2 | 25799.67 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)..... | 150.31 | 1923.71 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 534610.12 | 3221277.58 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 319079.61 | 2548655.86 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0 | 0 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0 | 0 |
| (b) Of All Other Loans | 0 | 0 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0 | 0 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0 | 0 |
| (b) Political Party Committees..... | 0 | 0 |
| (c) Other Political Committees (such as PACs)..... | 0 | 0 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0 | 0 |
| 21. OTHER DISBURSEMENTS | 6010 | 413420 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 325089.61 | 2962075.86 |

III. CASH SUMMARY

| | |
|---|------------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 1036192.11 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 534610.12 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 1570802.23 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 325089.61 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 1245712.62 |

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 5 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Danna Brothers Properties LLC

Mailing Address 9800 SE Stark Street

City Portland State OR Zip Code 97216-2408

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

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

Transaction ID : A-CF43645

Amount of Each Receipt this Period
 500

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

B. Full Name (Last, First, Middle Initial)
Joseph T. Danna

Mailing Address 14285 SE Summit Drive

City Clackamas State OR Zip Code 97015-8234

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

Name of Employer Occupation
Self - Elmer's Restaurant Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

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

Transaction ID : A-PIP556

Amount of Each Receipt this Period
 250

[MEMO ITEM]
Partnership Itemization Memo

C. Full Name (Last, First, Middle Initial)
Gerald S. Danna

Mailing Address 5401 SE Scenic Lane
Unit 206

City Vancouver State WA Zip Code 98661-0507

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

Name of Employer Occupation
Danna Brothers - Elmer's Restaurateur

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

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

Transaction ID : A-PIP555

Amount of Each Receipt this Period
 250

[MEMO ITEM]
Partnership Itemization Memo

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

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

500.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Carl K. Davis

Mailing Address 19558 Fairway Ridge Lane

City Bend State OR Zip Code 97702-1197

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

Name of Employer None Occupation Retired Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

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

Transaction ID : A-CF43642

Amount of Each Receipt this Period
 1000

B. Full Name (Last, First, Middle Initial)
Percy Jensen

Mailing Address 305 Pine Street

City Hood River State OR Zip Code 97031-2259

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 **420**

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

Transaction ID : A-CF43640

Amount of Each Receipt this Period
 20

C. Full Name (Last, First, Middle Initial)
Daniel S. Jordan

Mailing Address 1090 N Court Avenue

City Burns State OR Zip Code 97720-1015

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

Name of Employer Self Occupation Insurance Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **950**

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

Transaction ID : A-CF43641

Amount of Each Receipt this Period
 200

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

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

1220.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Nell Kuonen

Mailing Address 11800 Tingley Lane
Unit 10

City Klamath Falls State OR Zip Code 97603-9574

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 **950**

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

Transaction ID : A-CF43639

Amount of Each Receipt this Period
 100

B. Full Name (Last, First, Middle Initial)
Frank W. Richnak

Mailing Address 14915 Sprague River Road

City Chiloquin State OR Zip Code 97624-8605

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

Name of Employer None Occupation Retired US Army

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : A-CF43644

Amount of Each Receipt this Period
 50

C. Full Name (Last, First, Middle Initial)
Edward P Miska

Mailing Address 745 3rd Street

City Lake Oswego State OR Zip Code 97034-2349

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 **810**

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

Transaction ID : A-CF43691

Amount of Each Receipt this Period
 100

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

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

250.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Janet Geary

Mailing Address 1211 SW 5th Avenue
Suite 2980

City Portland State OR Zip Code 97204-3729

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 **3100**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : A-CF43669

Amount of Each Receipt this Period
 -2600
 refund excessive contribution dated 7/17/2014

B. Full Name (Last, First, Middle Initial)
Janet Geary

Mailing Address 1211 SW 5th Avenue
Suite 2980

City Portland State OR Zip Code 97204-3729

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 **3100**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : A-CF43670

Amount of Each Receipt this Period
 5200

C. Full Name (Last, First, Middle Initial)
Richard Geary

Mailing Address 1211 SW 5th Avenue
Suite 2980

City Portland State OR Zip Code 97204-3729

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 **3100**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : A-CF43671

Amount of Each Receipt this Period
 -1600
 refund excessive contribution dated 7/17/2014

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

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

1000.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Richard Geary

Mailing Address 1211 SW 5th Avenue
Suite 2980

City Portland State OR Zip Code 97204-3729

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 **3100**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : A-CF43672

Amount of Each Receipt this Period
4200

B. Full Name (Last, First, Middle Initial)
Robert C. Hale

Mailing Address 1124 SW Myrtle Drive

City Portland State OR Zip Code 97201-2271

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

Name of Employer Hale Companies Occupation AG Production/Food Processing

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : A-CF43673

Amount of Each Receipt this Period
2000

C. Full Name (Last, First, Middle Initial)
Rand L. Currier

Mailing Address 35 Regatta Road

City Weymouth State MA Zip Code 02191-1917

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

Name of Employer Granite Telecommunications Occupation COO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2014

Transaction ID : A-CF43877

Amount of Each Receipt this Period
2000

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

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

8200.00

**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 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Pamela Garvie

Mailing Address 202 N Columbus Street

City State Zip Code
Alexandria VA 22314-2412

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

Name of Employer Occupation
K&L Gates Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250

Date of Receipt
 M M / D D / Y Y Y Y
07 / 18 / 2014

Transaction ID : A-CF43878

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Richard Kimberly

Mailing Address 1318 Skipwith Road

City State Zip Code
McLean VA 22101-1834

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

Name of Employer Occupation
Kimberly Consulting President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
07 / 18 / 2014

Transaction ID : A-CF43879

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Neil R. Bryant

Mailing Address 2072 NW Glassow Drive

City State Zip Code
Bend OR 97701-5642

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

Name of Employer Occupation
Self Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y
07 / 21 / 2014

Transaction ID : A-CF43665

Amount of Each Receipt this Period
250

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

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

2250.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Patricia E. Carlson

Mailing Address 20387 Big Bear Court

City Bend State OR Zip Code 97702-9489

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

Name of Employer Carlson Sign Company Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2014

Transaction ID : A-CF43664

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Greg F. Cushman

Mailing Address 61370 Tam McArthur Loop

City Bend State OR Zip Code 97702-1181

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**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2014

Transaction ID : A-CF43663

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Joseph J. Florio

Mailing Address 1816 NW Duniway Court

City Bend State OR Zip Code 97701-5605

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**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2014

Transaction ID : A-CF43660

Amount of Each Receipt this Period
250

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

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

1750.00

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

| | | |
|---|---|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Jeffrey Robberson

Mailing Address 891 NW Stonepine Drive

City Bend State OR Zip Code 97701-6814

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

Name of Employer Robberson Ford Occupation Auto Dealer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2700**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2014

Transaction ID : A-CF43662

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Jeffrey Robberson

Mailing Address 891 NW Stonepine Drive

City Bend State OR Zip Code 97701-6814

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

Name of Employer Robberson Ford Occupation Auto Dealer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2700**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2014

Transaction ID : A-CF44063

Amount of Each Receipt this Period
2400

C. Full Name (Last, First, Middle Initial)
William L. Smith

Mailing Address 2334 NW Tower Rock Road

City Bend State OR Zip Code 97701-1020

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

Name of Employer William Smith Properties Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2014

Transaction ID : A-IF45183

Amount of Each Receipt this Period
590
 Inkind: catering for fundraising event

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

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

5590.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Oran Teater

Mailing Address 1837 NW Duniway Court

City Bend State OR Zip Code 97701-5606

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

Name of Employer RBC Wealth Management Occupation Financial Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
635.18

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2014

Transaction ID : A-IF45184

Amount of Each Receipt this Period
635.18

Inkind: fundraising event: food & drink

B. Full Name (Last, First, Middle Initial)
Frederic N. Tiplady

Mailing Address 18160 Cottonwood Road
PMB 141

City Sunriver State OR Zip Code 97707-9317

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

Name of Employer Patient Confidence Corp Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2014

Transaction ID : A-CF43659

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Amy Tykeson

Mailing Address PO Box 567

City Bend State OR Zip Code 97709-0567

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

Name of Employer BendBroadband Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

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

Transaction ID : A-CF43694

Amount of Each Receipt this Period
-300
refund excessive contribution 7/22/14

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

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

835.18

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Amy Tykeson

Mailing Address **PO Box 567**

City **Bend** State **OR** Zip Code **97709-0567**

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

Name of Employer **BendBroadband** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

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

Transaction ID : A-CF43695

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Jay N. Cranford

Mailing Address **4136 N Richmond Street**

City **Arlington** State **VA** Zip Code **22207-4816**

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

Name of Employer **Clark Geduldig Cranford & Ni** Occupation **Partner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250**

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

Transaction ID : A-IF45186

Amount of Each Receipt this Period
250

Inkind: fundraising services

C. Full Name (Last, First, Middle Initial)
Carilyn Alexander

Mailing Address **30658 SW Peach Cove Road**

City **West Linn** State **OR** Zip Code **97068-9432**

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**

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

Transaction ID : A-CF43696

Amount of Each Receipt this Period
1000

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

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

1750.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Milt Coyle
Full Name (Last, First, Middle Initial)
Mailing Address 288 NW Woodbrook Drive

City Grants Pass State OR Zip Code 97526-3337

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

Name of Employer Grayback Forestry Occupation Forestry Adm.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1520**

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

Transaction ID : A-CF43677

Amount of Each Receipt this Period
 750

B. Keith Loeffler
Full Name (Last, First, Middle Initial)
Mailing Address 947 SE Dogwood Lane

City Gresham State OR Zip Code 97080-1961

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**

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

Transaction ID : A-CF43674

Amount of Each Receipt this Period
 50

C. R. Brandon Burgess
Full Name (Last, First, Middle Initial)
Mailing Address 44 Cocoanut Row

City Palm Beach State FL Zip Code 33480-4069

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

Name of Employer Ion Media Occupation Chairman/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

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

Transaction ID : A-CF43843

Amount of Each Receipt this Period
 2600

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

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

3400.00

**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)
 11a 11b 11c 11d
 12 13a 13b 14 15
 PAGE 16 OF 330

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Susan C. Butler

Mailing Address 108 Harvard Street

City State Zip Code
 Alexandria VA 22314-2713

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

Name of Employer Occupation
 Capitol Resources Government Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000

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

Transaction ID : A-CF43845

Amount of Each Receipt this Period
 500

B. Full Name (Last, First, Middle Initial)
Saira Chaly-Burgess

Mailing Address 44 Coconut Row

City State Zip Code
 Palm Beach FL 33480-4069

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
 2600

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

Transaction ID : A-CF43844

Amount of Each Receipt this Period
 2600

C. Full Name (Last, First, Middle Initial)
Stephen B. Clark

Mailing Address 9273 Lerwick Drive

City State Zip Code
 Dublin OH 43017-9492

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

Name of Employer Occupation
 Clark Geduldig Cranford & Ni Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 500

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

Transaction ID : A-CF43846

Amount of Each Receipt this Period
 500

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

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

3600.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 17 OF 330

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Jay N. Cranford
 Mailing Address 4136 N Richmond Street
 City State Zip Code
 Arlington VA 22207-4816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Clark Geduldig Cranford & Ni Partner
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : A-CF43847
 Amount of Each Receipt this Period
 1000

B. Full Name (Last, First, Middle Initial)
Daniel J. Mattoon
 Mailing Address 6344 Cavalier Corridor
 City State Zip Code
 Falls Church VA 22044-1203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Mattoon & Associates Principle
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : A-CF43848
 Amount of Each Receipt this Period
 500

C. Full Name (Last, First, Middle Initial)
Deborah R. Sliz
 Mailing Address 2826 S Buchanan Street
 City State Zip Code
 Arlington VA 22206-1306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Morgan Meguire President/CEO
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : A-CF43849
 Amount of Each Receipt this Period
 500

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 18 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Kevin Flanigan

Mailing Address 11836 SW Breyman Avenue

| | | |
|----------|-------|------------|
| City | State | Zip Code |
| Portland | OR | 97219-8411 |

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

| | |
|---------------------------|------------|
| Name of Employer | Occupation |
| INland Sea Maritime Group | Developer |

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
07 / 26 / 2014

Transaction ID : A-CF43866

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Carmen Cutting

Mailing Address 2829 NW Nightfall Circle

| | | |
|------|-------|------------|
| City | State | Zip Code |
| Bend | OR | 97701-5441 |

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

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

Transaction ID : A-CF43711

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Paul Imwalle

Mailing Address 64390 Old Bend Redmond Highway

| | | |
|------|-------|------------|
| City | State | Zip Code |
| Bend | OR | 97701-8934 |

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

| | |
|-------------------|------------|
| Name of Employer | Occupation |
| I & J Carpets Inc | Owner |

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

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

Transaction ID : A-CF43721

Amount of Each Receipt this Period
250

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

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

750.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
J. Keith Kennedy

Mailing Address 3220 Juniper Lane

City Falls Church State VA Zip Code 22044-1609

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

Name of Employer Baker, Donelson, Bearman & Cal Occupation Chair, Federal Public Policy

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1770**

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

Transaction ID : A-CF43758

Amount of Each Receipt this Period
750

B. Full Name (Last, First, Middle Initial)
Ronald Cochran

Mailing Address 18624 Pinehurst Road

City Bend State OR Zip Code 97701-5242

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

Name of Employer Quail Run Ranch Occupation Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

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

Transaction ID : A-CF43716

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Edward P Miska

Mailing Address 745 3rd Street

City Lake Oswego State OR Zip Code 97034-2349

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 **810**

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

Transaction ID : A-CF43704

Amount of Each Receipt this Period
100

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

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

1350.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Susan K Norland

Mailing Address 2655 Shasta Way
Unit 2

City Klamath Falls State OR Zip Code 97603-4455

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

Name of Employer Hans Norland And Sons Occupation Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **345**

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

Transaction ID : A-CF43698

Amount of Each Receipt this Period
 10

B. Full Name (Last, First, Middle Initial)
Joseph Simas

Mailing Address 4118 Leonard Road

City Grants Pass State OR Zip Code 97527-9255

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 **230**

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

Transaction ID : A-CF43699

Amount of Each Receipt this Period
 30

C. Full Name (Last, First, Middle Initial)
David Hobbs

Mailing Address 300 New Jersey Avenue NW
Suite 601

City Washington State DC Zip Code 20001-2080

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

Name of Employer The Hobbs Group Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

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

Transaction ID : A-CF43841

Amount of Each Receipt this Period
 1000

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

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

1040.00

**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 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
John W. Howard

Mailing Address 17220 MacDuff Avenue

City State Zip Code
Olney MD 20832-2958

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

Name of Employer Occupation
US Chamber of Commerce Government Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

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

Transaction ID : A-CF44020

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Dewane Pinkerton

Mailing Address 919 Nadia Way

City State Zip Code
Medford OR 97504-9646

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

Name of Employer Occupation
None Retired Real Estate Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
510

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

Transaction ID : A-CF43890

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Nosler Investments LLC

Mailing Address 3375 NW Starview Drive

City State Zip Code
Bend OR 97701-1146

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

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

Transaction ID : A-CF43756

Amount of Each Receipt this Period
1500

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

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

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

2050.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 22 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) Robert Nosler | | Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2014 |
| Mailing Address 3375 NW Starview Drive | | Transaction ID : A-PIP557 |
| City Bend | State OR | Zip Code 97701-1146 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 1500 | |
| Name of Employer Nosler, Inc. | Occupation CEO/Owner | [MEMO ITEM] Partnership Itemization Memo |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 4500 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) The Confederated Tribes of the Warm Springs Reservation | | Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2014 |
| Mailing Address PO Box C | | Transaction ID : A-CF43757 |
| City Warm Springs | State OR | Zip Code 97761-3001 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 1500 | |
| Name of Employer | Occupation | [MEMO ITEM] Partnership Itemization Memo |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 3000 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) Tina Anderson | | Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2014 |
| Mailing Address 64575 McGrath Road | | Transaction ID : A-CF43747 |
| City Bend | State OR | Zip Code 97701-8020 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 250 | |
| Name of Employer Jackson Insurance | Occupation Secretary | [MEMO ITEM] Partnership Itemization Memo |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 350 | |

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

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 23 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
William R. Anderson

Mailing Address 64575 McGrath Road

City Bend State OR Zip Code 97701-8020

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

Name of Employer Mid Oregon FCU Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **850**

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

Transaction ID : A-CF43767

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Douglas Q. Badger

Mailing Address 12599 NW Forest Spring Lane

City Portland State OR Zip Code 97229-9360

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

Name of Employer QuinnThomas Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1125**

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

Transaction ID : A-CF43776

Amount of Each Receipt this Period
1125

C. Full Name (Last, First, Middle Initial)
Gary Barbour

Mailing Address 523 7th Street NE

City Washington State DC Zip Code 20002-5225

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

Name of Employer Barbour & Associates Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **770**

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

Transaction ID : A-CF43787

Amount of Each Receipt this Period
20

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

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

1245.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 24 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Brian Barney

Mailing Address 910 NE Johnson Creek Road

City State Zip Code
Prineville OR 97754-8634

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

Name of Employer Occupation
Self Farmer/Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1520

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

Transaction ID : A-CF43788

Amount of Each Receipt this Period
20

B. Full Name (Last, First, Middle Initial)
Scott Barrie

Mailing Address 2645 Doughton Street S

City State Zip Code
Salem OR 97302-5412

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

Name of Employer Occupation
BarrieHughes Govt Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
240

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

Transaction ID : A-CF43789

Amount of Each Receipt this Period
20

C. Full Name (Last, First, Middle Initial)
Dale E. Benson

Mailing Address 6416 SW Loop Drive

City State Zip Code
Portland OR 97221-3385

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
2950

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

Transaction ID : A-CF43790

Amount of Each Receipt this Period
50

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

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

90.00

**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 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Boyd Britton

Mailing Address **PO Box 64**

City **John Day** State **OR** Zip Code **97845-0064**

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

Name of Employer **Grant County/Boyd Britton We** Occupation **Commissioner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1710**

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

Transaction ID : A-CF43793

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Gregory Byrne

Mailing Address **2301 NW 6th Street**

City **Bend** State **OR** Zip Code **97701-1189**

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

Name of Employer **Lone Rock Timber** Occupation **CFO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1590**

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

Transaction ID : A-CF43794

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Nate Chapman

Mailing Address **2725 NW Rainbow Ridge Drive**

City **Bend** State **OR** Zip Code **97701-8722**

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

Name of Employer **Tec Systems** Occupation **Software Consultant**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **568**

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

Transaction ID : A-CF43798

Amount of Each Receipt this Period
488
 donated back golf tourney cash prize

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

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

638.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 26 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Nate Chapman
 Full Name (Last, First, Middle Initial)
 Mailing Address 2725 NW Rainbow Ridge Drive
 City Bend State OR Zip Code 97701-8722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tec Systems Occupation Software Consultant
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **568**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014
Transaction ID : A-CF43799
 Amount of Each Receipt this Period
 40

B. Cynthia Couey
 Full Name (Last, First, Middle Initial)
 Mailing Address 453 Spyglass Drive
 City Eugene State OR Zip Code 97401-2091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KPD Insurance Occupation Records Administrator
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014
Transaction ID : A-CF43752
 Amount of Each Receipt this Period
 1500

C. Bruce Daucsavage
 Full Name (Last, First, Middle Initial)
 Mailing Address 2705 NW Collette Way
 City Bend State OR Zip Code 97701-8711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ochoco Lumber Co. Occupation President
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **1640**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014
Transaction ID : A-CF43750
 Amount of Each Receipt this Period
 750

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

2290.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 27 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Bruce Daucsavage

Mailing Address 2705 NW Collette Way

City Bend State OR Zip Code 97701-8711

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

Name of Employer Ochoco Lumber Co. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1640**

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

Transaction ID : A-CF43801

Amount of Each Receipt this Period
20

B. Full Name (Last, First, Middle Initial)
Carrie Dice

Mailing Address 63790 Johnson Ranch Road

City Bend State OR Zip Code 97701

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

Name of Employer None Occupation Community Volunteer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **820**

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

Transaction ID : A-CF43749

Amount of Each Receipt this Period
750

C. Full Name (Last, First, Middle Initial)
Carrie Dice

Mailing Address 63790 Johnson Ranch Road

City Bend State OR Zip Code 97701

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

Name of Employer None Occupation Community Volunteer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **820**

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

Transaction ID : A-CF43804

Amount of Each Receipt this Period
20

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

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

790.00

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

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

FOR LINE NUMBER: PAGE 28 OF 330
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Kevin Donham

Mailing Address 2666 NE Tennessee Lane

City State Zip Code
Prineville OR 97754-9168

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

Name of Employer Occupation
PatRick Operations Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
770

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

Transaction ID : A-CF43779

Amount of Each Receipt this Period
750

B. Full Name (Last, First, Middle Initial)
Kevin Donham

Mailing Address 2666 NE Tennessee Lane

City State Zip Code
Prineville OR 97754-9168

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

Name of Employer Occupation
PatRick Operations Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
770

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

Transaction ID : A-CF43805

Amount of Each Receipt this Period
20

C. Full Name (Last, First, Middle Initial)
Jeffrey T Eager

Mailing Address 105 NW Delaware Avenue

City State Zip Code
Bend OR 97701-2927

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

Name of Employer Occupation
Self Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
790

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

Transaction ID : A-CF43806

Amount of Each Receipt this Period
20

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

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

790.00

**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 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Michael A. Fahey

Mailing Address 17219 SE 36th Street

City Vancouver State WA Zip Code 98683-9465

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

Name of Employer Columbia Helicopters, Inc. Occupation President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3320**

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

Transaction ID : A-CF43781

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
David Filippi

Mailing Address 1982 Egan Way

City Lake Oswego State OR Zip Code 97034-2728

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

Name of Employer Stoel Rives Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **825**

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

Transaction ID : A-CF43765

Amount of Each Receipt this Period
800

C. Full Name (Last, First, Middle Initial)
Gary D. Fish

Mailing Address 61415 Tam McArthur Loop

City Bend State OR Zip Code 97702-1154

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

Name of Employer Deschutes Brewery, Inc. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1570**

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

Transaction ID : A-CF43753

Amount of Each Receipt this Period
800

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

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

1650.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 30 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Patsy Gasser

Mailing Address **PO Box 452**

City **Merrill** State **OR** Zip Code **97633-0452**

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

Name of Employer **Basin Fertilizer** Occupation **Executive Assistant**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1700**

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

Transaction ID : A-CF43764

Amount of Each Receipt this Period
750

B. Full Name (Last, First, Middle Initial)
T. James Gillespie

Mailing Address **4607 Harling Lane**

City **Bethesda** State **MD** Zip Code **20814-3503**

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

Name of Employer **NAB** Occupation **Gov't Relations**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **219**

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

Transaction ID : A-CF43766

Amount of Each Receipt this Period
199

C. Full Name (Last, First, Middle Initial)
T. James Gillespie

Mailing Address **4607 Harling Lane**

City **Bethesda** State **MD** Zip Code **20814-3503**

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

Name of Employer **NAB** Occupation **Gov't Relations**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **219**

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

Transaction ID : A-CF43809

Amount of Each Receipt this Period
20

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

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

969.00

**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 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Doug Goe

Mailing Address 3946 NE 32nd Avenue

City Portland State OR Zip Code 97212-1701

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

Name of Employer Orrick LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **280**

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

Transaction ID : A-CF43770

Amount of Each Receipt this Period
200

B. Full Name (Last, First, Middle Initial)
Richard Golb

Mailing Address 20215 SE Fernridge Drive

City Camas State WA Zip Code 98607-9462

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

Name of Employer PacificComm Occupation Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4160**

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

Transaction ID : A-CF43771

Amount of Each Receipt this Period
1600

C. Full Name (Last, First, Middle Initial)
Richard Golb

Mailing Address 20215 SE Fernridge Drive

City Camas State WA Zip Code 98607-9462

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

Name of Employer PacificComm Occupation Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4160**

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

Transaction ID : A-CF43810

Amount of Each Receipt this Period
20

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

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

1820.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 32 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Sandra Green

Mailing Address 19525 Innes Market Road

City Bend State OR Zip Code 97701-8157

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

Name of Employer N-Link Corporation Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

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

Transaction ID : A-CF43783

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Brian Hard

Mailing Address 13323 E San Juan Lane

City Spokane Valley State WA Zip Code 99206-7041

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

Name of Employer Self Occupation Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

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

Transaction ID : A-CF43780

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Megan Hauck

Mailing Address 133 Duddington Place SE

City Washington State DC Zip Code 20003-2625

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

Name of Employer Nathanson+Hauck Occupation Government Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

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

Transaction ID : A-CF44022

Amount of Each Receipt this Period
500

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 33 OF 330
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Camille Hukari

Mailing Address 1938 Osprey Drive

City Redmond State OR Zip Code 97756-9225

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

Name of Employer Self Occupation Orchardist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **636**

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

Transaction ID : A-IF45182

Amount of Each Receipt this Period
460
 Inkind: fundraising event prizes: wine baskets

B. Full Name (Last, First, Middle Initial)
Shaun Jillions

Mailing Address 17651 SW Inkster Drive

City Sherwood State OR Zip Code 97140-8242

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

Name of Employer Deckert Jillions Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **345**

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

Transaction ID : A-CF43769

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Frederick D. Jubitz

Mailing Address 6765 SW Gable Parkway

City Portland State OR Zip Code 97225-2611

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

Name of Employer Self Occupation Restaurant Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800**

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

Transaction ID : A-CF43777

Amount of Each Receipt this Period
800

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

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

1310.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 34 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
J. Keith Kennedy

Mailing Address 3220 Juniper Lane

City Falls Church State VA Zip Code 22044-1609

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

Name of Employer Baker, Donelson, Bearman & Cal Occupation Chair, Federal Public Policy

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1770**

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

Transaction ID : A-CF43813

Amount of Each Receipt this Period
20

B. Full Name (Last, First, Middle Initial)
Dennis R. Luke

Mailing Address PO Box 9069

City Bend State OR Zip Code 97708-9069

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 **660**

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

Transaction ID : A-CF43754

Amount of Each Receipt this Period
300

C. Full Name (Last, First, Middle Initial)
Dennis R. Luke

Mailing Address PO Box 9069

City Bend State OR Zip Code 97708-9069

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 **660**

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

Transaction ID : A-CF43814

Amount of Each Receipt this Period
20

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

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

340.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 35 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Toby A. Luther

Mailing Address **PO Box 1127**

City **Roseburg** State **OR** Zip Code **97470-0255**

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

Name of Employer **Lone Rock Timber Co** Occupation **forester**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2700**

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

Transaction ID : A-CF43746

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Michael Moore

Mailing Address **42304 SE Oral Hull Road**

City **Sandy** State **OR** Zip Code **97055-6714**

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

Name of Employer **Columbia Helicopters** Occupation **Director of Domestic Operations**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **790**

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

Transaction ID : A-CF43816

Amount of Each Receipt this Period
20

C. Full Name (Last, First, Middle Initial)
Dennis D. Oliphant

Mailing Address **88 NW Drake Road**

City **Bend** State **OR** Zip Code **97701-2346**

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

Name of Employer **Sun Country Tours** Occupation **Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **790**

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

Transaction ID : A-CF43817

Amount of Each Receipt this Period
40

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 160.00 |
| 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 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Jack B. Owen

Mailing Address 55661 Big River Drive

City Bend State OR Zip Code 97707-2303

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 **1540**

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

Transaction ID : A-CF43818

Amount of Each Receipt this Period
20

B. Full Name (Last, First, Middle Initial)
Frank Pearson

Mailing Address 6897 SE Brigadoon Street

City Portland State OR Zip Code 97267-3267

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

Name of Employer Contact Industries Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1560**

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

Transaction ID : A-CF43775

Amount of Each Receipt this Period
750

C. Full Name (Last, First, Middle Initial)
Frank Pearson

Mailing Address 6897 SE Brigadoon Street

City Portland State OR Zip Code 97267-3267

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

Name of Employer Contact Industries Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1560**

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

Transaction ID : A-CF43819

Amount of Each Receipt this Period
20

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

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

790.00

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

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

FOR LINE NUMBER: PAGE 37 OF 330
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
William D. Perry

Mailing Address 202 SE 16th Avenue

City State Zip Code
Canby OR 97013-6379

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

Name of Employer Occupation
Oregon Restaurant Association Assn Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1700

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

Transaction ID : A-CF43778

Amount of Each Receipt this Period
850

B. Full Name (Last, First, Middle Initial)
Ed P. Pfannmuller

Mailing Address PO Box 400

City State Zip Code
Yachats OR 97498-0400

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

Name of Employer Occupation
The Adobe Resort Owner/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1350

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

Transaction ID : A-CF43782

Amount of Each Receipt this Period
850

C. Full Name (Last, First, Middle Initial)
William C. Pierce

Mailing Address 961 Glen Eden Court NW

City State Zip Code
Salem OR 97304-2258

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

Name of Employer Occupation
Self Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2620

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

Transaction ID : A-CF43821

Amount of Each Receipt this Period
20

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

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

1720.00

**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 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Wesley B. Price III

Mailing Address 975 SW Colorado Avenue
Suite 200

City Bend State OR Zip Code 97702-3161

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

Name of Employer Harrigan,Price, Fronk LLC Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1570**

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

Transaction ID : A-CF43748

Amount of Each Receipt this Period
750

B. Full Name (Last, First, Middle Initial)
Wesley B. Price III

Mailing Address 975 SW Colorado Avenue
Suite 200

City Bend State OR Zip Code 97702-3161

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

Name of Employer Harrigan,Price, Fronk LLC Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1570**

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

Transaction ID : A-CF43822

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Greg Remensperger

Mailing Address 777 NE 7th Avenue

City Portland State OR Zip Code 97232-2101

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

Name of Employer Oregon Auto Dealers Association Occupation Exec VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **220**

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

Transaction ID : A-CF43823

Amount of Each Receipt this Period
100

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

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

900.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 39 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Doug Rychard

Mailing Address **PO Box 8180**

City **Bend** State **OR** Zip Code **97708-8180**

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

Name of Employer **River Bend Equipment** Occupation **Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1620**

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

Transaction ID : A-CF43751

Amount of Each Receipt this Period
750

B. Full Name (Last, First, Middle Initial)
Doug Rychard

Mailing Address **PO Box 8180**

City **Bend** State **OR** Zip Code **97708-8180**

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

Name of Employer **River Bend Equipment** Occupation **Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1620**

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

Transaction ID : A-CF43825

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Gerald Scott

Mailing Address **3390 S Lambert Street**

City **Eugene** State **OR** Zip Code **97405-5517**

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

Name of Employer **Elmer's Restaurants, Inc.** Occupation **restaurant management**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1520**

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

Transaction ID : A-CF43762

Amount of Each Receipt this Period
20

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

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

820.00

**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 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Patrick A. Thomas

Mailing Address 5 Centerpointe Drive
Suite 570

City Lake Oswego State OR Zip Code 97035-8635

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

Name of Employer QuinnThomas Public Affairs, LLC Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1315**

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

Transaction ID : A-CF43755

Amount of Each Receipt this Period
1125

B. Full Name (Last, First, Middle Initial)
Patrick A. Thomas

Mailing Address 5 Centerpointe Drive
Suite 570

City Lake Oswego State OR Zip Code 97035-8635

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

Name of Employer QuinnThomas Public Affairs, LLC Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1315**

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

Transaction ID : A-CF43828

Amount of Each Receipt this Period
20

C. Full Name (Last, First, Middle Initial)
Jason Vaillancourt

Mailing Address 16200 SW Bobolink Street

City Beaverton State OR Zip Code 97007-9035

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

Name of Employer Natural Resource Group, LLC Occupation Senior Public Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **495**

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

Transaction ID : A-CF43784

Amount of Each Receipt this Period
250

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

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

1395.00

**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 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Jason Vaillancourt

Mailing Address 16200 SW Bobolink Street

City State Zip Code
Beaverton OR 97007-9035

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

Name of Employer Occupation
Natural Resource Group, LLC Senior Public Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
495

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

Transaction ID : A-CF43831

Amount of Each Receipt this Period
20

B. Full Name (Last, First, Middle Initial)
M. Dennis Wharton

Mailing Address 21648 Piccadilly Circus Court

City State Zip Code
Ashburn VA 20147-4522

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

Name of Employer Occupation
NAB EVP Communications

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1270

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

Transaction ID : A-CF43832

Amount of Each Receipt this Period
20

C. Full Name (Last, First, Middle Initial)
Gina Wheelock

Mailing Address 500 Morton Way

City State Zip Code
Jacksonville OR 97530-9802

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
770

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

Transaction ID : A-CF43834

Amount of Each Receipt this Period
20

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

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

60.00

**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 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Michael Wheelock

Mailing Address 500 Morton Way

City Jacksonville State OR Zip Code 97530-9802

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

Name of Employer Grayback Forestry Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2450**

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

Transaction ID : A-CF43833

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
David Dewey

Mailing Address 60674 Teton Court

City Bend State OR Zip Code 97702-9400

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**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 05 / 2014

Transaction ID : A-CF43713

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Robert D. O'Neill

Mailing Address 2825 SW 49th Street

City Redmond State OR Zip Code 97756-1766

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

Name of Employer Self Occupation Self Storage Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 05 / 2014

Transaction ID : A-CF44023

Amount of Each Receipt this Period
50

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

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

650.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 43 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Kurt Austermann

Mailing Address 862 Nadia Way

City Medford State OR Zip Code 97504-9634

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 **260**

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

Transaction ID : A-CF43960

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Jean Boyer Cowling

Mailing Address 423 Girard Drive

City Medford State OR Zip Code 97504-6313

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**

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

Transaction ID : A-CF43958

Amount of Each Receipt this Period
150

C. Full Name (Last, First, Middle Initial)
Creed Brattain

Mailing Address 530 Fir Knoll Lane, NE

City Salem State OR Zip Code 97317

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

Name of Employer Brattain Intntl Trucks Occupation Chairman/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1204.04**

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

Transaction ID : A-CF43719

Amount of Each Receipt this Period
103.19

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

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

353.19

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 44 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
John C. Dailey

Mailing Address 2673 Oak View Circle

City Medford State OR Zip Code 97504-6320

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

Name of Employer None Occupation Retired Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

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

Transaction ID : A-CF43930

Amount of Each Receipt this Period
 1000

B. Full Name (Last, First, Middle Initial)
Jerry Evans

Mailing Address PO Box 359

City Jacksonville State OR Zip Code 97530-0359

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

Name of Employer Self Occupation Restaurant Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **610**

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

Transaction ID : A-CF43932

Amount of Each Receipt this Period
 260

C. Full Name (Last, First, Middle Initial)
Mark D. Gibson

Mailing Address 1623 Edgevale Avenue

City Medford State OR Zip Code 97504-3663

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

Name of Employer Siskiyou Transportation Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

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

Transaction ID : A-CF43963

Amount of Each Receipt this Period
 150

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

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

1410.00

**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 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Robert M. Heverly

Mailing Address 2104 Quail Point Circle

City Medford State OR Zip Code 97504-4523

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

Name of Employer None Occupation Retired 3M

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

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

Transaction ID : A-CF43957

Amount of Each Receipt this Period
150

B. Full Name (Last, First, Middle Initial)
Thomas Hoyt

Mailing Address 975 Oak Street Suite 700

City Eugene State OR Zip Code 97401-3121

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

Name of Employer Speer Hoyt LLC Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

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

Transaction ID : A-CF43720

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Lovella I. Moore

Mailing Address 3600 Westover Boulevard

City Central Point State OR Zip Code 97502-1345

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**

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

Transaction ID : A-CF43951

Amount of Each Receipt this Period
50

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

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

700.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 46 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Kim Pickett

Mailing Address 3440 Karges Way

City Medford State OR Zip Code 97504-9395

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

Name of Employer Self Occupation Computer Software

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

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

Transaction ID : A-CF43912

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Dewane Pinkerton

Mailing Address 919 Nadia Way

City Medford State OR Zip Code 97504-9646

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

Name of Employer None Occupation Retired Real Estate Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **510**

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

Transaction ID : A-CF43892

Amount of Each Receipt this Period
150

C. Full Name (Last, First, Middle Initial)
Cathy Schleining

Mailing Address 1293 Park Street

City Ashland State OR Zip Code 97520-3534

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

Name of Employer Paradise Lodge Occupation Director of Operations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

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

Transaction ID : A-CF43941

Amount of Each Receipt this Period
50

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 47 OF 330
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Trenor Scott

Mailing Address 346 Bickford Drive

City Grants Pass State OR Zip Code 97527-9603

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 **1067**

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

Transaction ID : A-CF43923

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Stan Shulster

Mailing Address 165 Pilot View Road

City Ashland State OR Zip Code 97520-9629

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

Name of Employer Bella Vista Vineyards Occupation Attorney/Grape Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1300**

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

Transaction ID : A-CF43928

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
John W. Snider

Mailing Address 5090 Pleasant Creek Road

City Rogue River State OR Zip Code 97537-4752

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 **350**

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

Transaction ID : A-CF43929

Amount of Each Receipt this Period
100

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

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

200.00

**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 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Catherine Steigerwald

Mailing Address PO Box 1708

City Jacksonville State OR Zip Code 97530-1708

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 **430**

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

Transaction ID : A-CF43895

Amount of Each Receipt this Period
 200

B. Full Name (Last, First, Middle Initial)
Catherine Steigerwald

Mailing Address PO Box 1708

City Jacksonville State OR Zip Code 97530-1708

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 **430**

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

Transaction ID : A-CF43896

Amount of Each Receipt this Period
 50

C. Full Name (Last, First, Middle Initial)
Alvin H. Thelin

Mailing Address 2214 Quail Point Terrace

City Medford State OR Zip Code 97504-4515

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

Name of Employer None Occupation Retired Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275**

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

Transaction ID : A-CF43900

Amount of Each Receipt this Period
 25

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

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

275.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 49 OF 330 |
| | <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)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
William D. Thorndike Jr.

Mailing Address 2875 David Lane

City Medford State OR Zip Code 97504-9412

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

Name of Employer Medford Fabrication Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **530**

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

Transaction ID : A-CF43904

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Gayle A. Wolfe

Mailing Address 11871 Highway 66

City Ashland State OR Zip Code 97520-9418

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

Name of Employer None Occupation Retired Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : A-CF43956

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Gary L. Blahna

Mailing Address 440 Fernwood Drive

City Ashland State OR Zip Code 97520-1612

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 **2225**

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

Transaction ID : A-CF43707

Amount of Each Receipt this Period
1000

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

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

1075.00

**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 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Gary L. Blahna

Mailing Address 440 Fernwood Drive

City Ashland State OR Zip Code 97520-1612

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 **2225**

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

Transaction ID : A-CF43708

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Amy L. Jensen Cunniffe

Mailing Address 7715 Crossover Drive

City McLean State VA Zip Code 22102-2507

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

Name of Employer DLA Piper Occupation Sr. Policy Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

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

Transaction ID : A-CF43731

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Daniel P. Meyer

Mailing Address 2506 Duxbury Place

City Alexandria State VA Zip Code 22308-2138

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

Name of Employer Duberstein Group Occupation Sr. VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

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

Transaction ID : A-CF43732

Amount of Each Receipt this Period
1000

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

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

1525.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 51 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Robert M. Farris

Mailing Address PO Box 1080

City Shady Cove State OR Zip Code 97539-1080

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

Name of Employer None Occupation Retired Navy

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **205**

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

Transaction ID : A-CF44025

Amount of Each Receipt this Period
35

B. Full Name (Last, First, Middle Initial)
Cathy Schleining

Mailing Address 1293 Park Street

City Ashland State OR Zip Code 97520-3534

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

Name of Employer Paradise Lodge Occupation Director of Operations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 14 / 2014

Transaction ID : A-CF44026

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Rocky McVay

Mailing Address PO Box 2876

City Harbor State OR Zip Code 97415-0504

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

Name of Employer Assn of OR Counties Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : A-CF43887

Amount of Each Receipt this Period
250

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

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

385.00

**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 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Sean O'Hollaren

Mailing Address 5050 SW Hilltop Lane

City: Portland State: OR Zip Code: 97221-2304

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

Name of Employer: Nike Occupation: Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000

Date of Receipt: 08 / 15 / 2014

Transaction ID : A-CF43884

Amount of Each Receipt this Period: 2000

B. Full Name (Last, First, Middle Initial)
Joseph Simas

Mailing Address 4118 Leonard Road

City: Grants Pass State: OR Zip Code: 97527-9255

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: 230

Date of Receipt: 08 / 15 / 2014

Transaction ID : A-CF44028

Amount of Each Receipt this Period: 25

C. Full Name (Last, First, Middle Initial)
Linda P. Mautz

Mailing Address 7550 SW Middle Greens Road

City: Wilsonville State: OR Zip Code: 97070-9417

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

Name of Employer: Pearson Ranches Occupation: Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250

Date of Receipt: 08 / 16 / 2014

Transaction ID : A-CF44032

Amount of Each Receipt this Period: 250

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

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

2275.00

**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 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Robert T. Mautz

Mailing Address 7550 SW Middle Greens Road

City Wilsonville State OR Zip Code 97070-9417

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 16 / 2014

Transaction ID : A-CF44031

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Barbara L. Levy

Mailing Address PO Box 69

City Echo State OR Zip Code 97826-0069

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 **2600**

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

Transaction ID : A-CF43888

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
Robert Levy

Mailing Address PO Box 69

City Echo State OR Zip Code 97826

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

Name of Employer Self Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

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

Transaction ID : A-CF43889

Amount of Each Receipt this Period
2600

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

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

5450.00

**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 54 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Allen E. Moore | | Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 19 / 2014 |
| Mailing Address 2399 Lacey Road | | Transaction ID : A-CF43724 |
| City Hood River | State OR | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500 |
| Name of Employer None | Occupation Retired Farmer | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1025 | |

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Susan Alameda | | Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 22 / 2014 |
| Mailing Address 111 Montview Street | | Transaction ID : A-CF44035 |
| City Ashland | State OR | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250 |
| 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 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Brian Hard | | Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 25 / 2014 |
| Mailing Address 13323 E San Juan Lane | | Transaction ID : A-CF43760 |
| City Spokane Valley | State WA | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1930 |
| Name of Employer Self | Occupation Government Relations | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 5200 | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 2680.00 |
| 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 55 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Laura Hard

Mailing Address 13323 E San Juan Lane

City State Zip Code
Spokane Valley WA 99206-7041

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

Name of Employer Occupation
The Box Maker Regional Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1320

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08 | | 25 | | 2014 |

Transaction ID : A-CF43759

Amount of Each Receipt this Period
1070

B. Full Name (Last, First, Middle Initial)
Nancy Baley

Mailing Address PO Box 531

City State Zip Code
Merrill OR 97633-0531

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

Name of Employer Occupation
Walmart Pharmacist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08 | | 28 | | 2014 |

Transaction ID : A-CF44042

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Peggy Binzel

Mailing Address PO Box 130

City State Zip Code
Ridge MD 20680-0130

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

Name of Employer Occupation
Podesta Group Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08 | | 28 | | 2014 |

Transaction ID : A-CF44039

Amount of Each Receipt this Period
500

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

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

1670.00

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

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

FOR LINE NUMBER: PAGE 56 OF 330
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Earlene L. Hansen

Mailing Address 14760 S Whispering Pines Lane

City Oregon City State OR Zip Code 97045-7455

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**

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

Transaction ID : A-CF44040

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Phillip A Lane

Mailing Address 5100 Culbertson Drive

City Mount Hood Parkdale State OR Zip Code 97041-7736

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 **350**

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

Transaction ID : A-CF44045

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
James D. Rathbone

Mailing Address 940 NE Raven Court

City Bend State OR Zip Code 97701-8816

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 **1050**

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

Transaction ID : A-CF44038

Amount of Each Receipt this Period
100

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

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

200.00

**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 57 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Diana Cox

Mailing Address **PO Box 476**

City **Christmas Valley** State **OR** Zip Code **97641-0476**

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**

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

Transaction ID : A-CF44046

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Nan Dewey

Mailing Address **32200 SW French Prairie Road
Apt. B209**

City **Wilsonville** State **OR** Zip Code **97070-5456**

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**

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

Transaction ID : A-CF43993

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
L. Roy Hyder

Mailing Address **3899 SW Eureka Lane**

City **Madras** State **OR** Zip Code **97741-8826**

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

Name of Employer **None** Occupation **Retired Law Enforcement**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

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

Transaction ID : A-CF43992

Amount of Each Receipt this Period
100

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

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

1300.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 58 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Dixie B Powers

Mailing Address 3168 Lakeview Boulevard

City Lake Oswego State OR Zip Code 97035-3652

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

Name of Employer None Occupation Retired Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **205**

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

Transaction ID : A-CF44064

Amount of Each Receipt this Period
 100

B. Full Name (Last, First, Middle Initial)
Stanley E. Clark

Mailing Address 6060 SW Coyote Avenue

City Redmond State OR Zip Code 97756-9536

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 **350**

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

Transaction ID : A-CF43985

Amount of Each Receipt this Period
 250

C. Full Name (Last, First, Middle Initial)
Henrietta Fielek

Mailing Address 110 4th Street SE

City Washington State DC Zip Code 20003-1012

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

Name of Employer American Hospital Association Occupation governmental affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

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

Transaction ID : A-CF44065

Amount of Each Receipt this Period
 1000

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

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

1350.00

**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 59 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Donald R. Pollard

Mailing Address 15868 Westmeadow Lane

City Sisters State OR Zip Code 97759-9892

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

Name of Employer GFP Enterprises, Inc. Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3250**

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

Transaction ID : A-CF43986

Amount of Each Receipt this Period
 750

B. Full Name (Last, First, Middle Initial)
Percy Jensen

Mailing Address 305 Pine Street

City Hood River State OR Zip Code 97031-2259

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 **420**

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

Transaction ID : A-CF43977

Amount of Each Receipt this Period
 100

C. Full Name (Last, First, Middle Initial)
Christopher A. Moudry

Mailing Address PO Box 446

City Merrill State OR Zip Code 97633-0446

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

Name of Employer Basin Fertilizer Occupation Administration

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1505**

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

Transaction ID : A-CF43970

Amount of Each Receipt this Period
 1000

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

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

1850.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 60 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Thomas G. Schott

Mailing Address **PO Box 232**

City **Fossil** State **OR** Zip Code **97830-0232**

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

Name of Employer **Self** Occupation **Rancher**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

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

Transaction ID : A-CF43972

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Lawrence Wilson

Mailing Address **1015 Eastman Drive**

City **Bigfork** State **MT** Zip Code **59911-6544**

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

Name of Employer **L&L Broadcasting** Occupation **Chairman**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

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

Transaction ID : A-CF43989

Amount of Each Receipt this Period
2600

Earmarked through NAB PAC. Conduit received 8/28/2014

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

Mailing Address **1771 N Street NW**

City **Washington** State **DC** Zip Code **20036-2800**

FEC ID number of contributing federal political committee. **C C00009985**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **37550**

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

Transaction ID : A-CF43989.e

Amount of Each Receipt this Period
2600

[MEMO ITEM]
 Earmarked-Original Details. Total Earmarked via this conduit: \$37,550.00. PAC limit not affected.

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

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

2700.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 61 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Foster & Associates, CPA, LLC

Mailing Address 9011 SW Beaverton Hillsdale Hwy
Suite 1A

City Portland State OR Zip Code 97225-2452

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

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

Transaction ID : A-CF43968

Amount of Each Receipt this Period
500

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

B. Full Name (Last, First, Middle Initial)
Carl W Foster

Mailing Address 4324 SE 178th Place

City Vancouver State WA Zip Code 98683-2800

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

Name of Employer Occupation
Self CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

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

Transaction ID : A-PIP559

Amount of Each Receipt this Period
500

[MEMO ITEM]
Partnership Itemization Memo

C. Full Name (Last, First, Middle Initial)
Carol Trumbo

Mailing Address 70707 Wild Rose Lane

City Pendleton State OR Zip Code 97801-7009

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

Name of Employer Occupation
None Retired Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

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

Transaction ID : A-CF43967

Amount of Each Receipt this Period
100

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

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

600.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 62 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Gerald Barnes

Mailing Address 1452 Yellowstone Avenue

City Medford State OR Zip Code 97504-9628

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**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : A-CF43965

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Mark Dunn

Mailing Address 4094 N Hackberry Way

City Boise State ID Zip Code 83702-1662

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

Name of Employer JR Simplot Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800**

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

Transaction ID : A-IF45179

Amount of Each Receipt this Period
400

Inkind: raffle item: gift cards

C. Full Name (Last, First, Middle Initial)
Laura Hard

Mailing Address 13323 E San Juan Lane

City Spokane Valley State WA Zip Code 99206-7041

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

Name of Employer The Box Maker Occupation Regional Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1320**

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

Transaction ID : A-IF45173

Amount of Each Receipt this Period
250

Inkind: raffle item: gift certificate

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

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

700.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 63 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Leigh T. Johnson

Mailing Address 3820 Hillcrest Road

City Medford State OR Zip Code 97504-9322

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

Name of Employer People's Bank Occupation Govt Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **985.9**

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

Transaction ID : A-IF45169

Amount of Each Receipt this Period
635.9

Inkind: raffle item: Harry & David certificates

B. Full Name (Last, First, Middle Initial)
Eugene Jones

Mailing Address PO Box 657

City Ontario State OR Zip Code 97914-0657

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

Name of Employer Self Occupation Manufacturing

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **330**

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

Transaction ID : A-CF44018

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Blair Larkins

Mailing Address 454 M Street NW Apt. 1

City Washington State DC Zip Code 20001-4660

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

Name of Employer Bockorny Group Occupation Director of Legislative Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

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

Transaction ID : A-CF44067

Amount of Each Receipt this Period
250

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

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

985.90

**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 64 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Abigail Slater

Mailing Address 215 A Street NE

City Washington State DC Zip Code 20002-7305

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

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

Transaction ID : A-CF44068

Amount of Each Receipt this Period
 250

B. Full Name (Last, First, Middle Initial)
Jay R. Sullivan

Mailing Address 6120 Vernon Terrace

City Alexandria State VA Zip Code 22307-1151

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

Name of Employer Jamison & Sullivan Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

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

Transaction ID : A-IF45170

Amount of Each Receipt this Period
 1000

Inkind: raffle item: event tickets

C. Full Name (Last, First, Middle Initial)
Mary George Sullivan

Mailing Address 6120 Vernon Terrace

City Alexandria State VA Zip Code 22307-1151

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

Name of Employer None Occupation Mother

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **720**

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

Transaction ID : A-IF45171

Amount of Each Receipt this Period
 720

Inkind: raffle item: event tickets

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

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

1970.00

**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 65 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Carlos Tambini

Mailing Address 1401 Q Street NW
Apt. 205

City Washington State DC Zip Code 20009-7819

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1118.93

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

Transaction ID : A-IF45178

Amount of Each Receipt this Period
118.93

Inkind: raffle item: beverages

B. Full Name (Last, First, Middle Initial)
Mary Jane Tobiason

Mailing Address 22325 White Peaks Drive

City Bend State OR Zip Code 97702-9213

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

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

Transaction ID : A-CF44016

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
William M. Webb

Mailing Address 9908 Lindel Lane

City Vienna State VA Zip Code 22181-4033

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

Name of Employer Webb Associates Occupation Land Survey

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
475

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

Transaction ID : A-IF45180

Amount of Each Receipt this Period
250

Inkind: raffle item: gift card

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

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

418.93

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 66 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Sam Geduldig

Mailing Address 1519 Pathfinder Lane

City State Zip Code
Mc Lean VA 22101-3509

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

Name of Employer Occupation
Clark Lytle & Geduldig Sr Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

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

Transaction ID : A-CF44011

Amount of Each Receipt this Period
1500

B. Full Name (Last, First, Middle Initial)
Carolyn Hicks

Mailing Address 655 15th Street NW
Suite 425

City State Zip Code
Washington DC 20005-5724

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

Name of Employer Occupation
Bokorny Group Lobbyist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

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

Transaction ID : A-CF44069

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Ball Janik LLP

Mailing Address 101 SW Main Street
Suite 1100

City State Zip Code
Portland OR 97204-3219

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44116

Amount of Each Receipt this Period
1000

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

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 67 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Phillip E. Joseph

Mailing Address 101 SW Main Street
Suite 1100

City Portland State OR Zip Code 97204-3219

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

Name of Employer Ball Janik Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
394.24

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-PIP569

Amount of Each Receipt this Period
134.08

[MEMO ITEM]
Partnership Itemization Memo

B. Full Name (Last, First, Middle Initial)
James T. McDermott

Mailing Address 101 SW Main Street
Suite 1100

City Portland State OR Zip Code 97204-3219

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

Name of Employer Ball Janik Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
311.49

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-PIP571

Amount of Each Receipt this Period
108.24

[MEMO ITEM]
Partnership Itemization Memo

C. Full Name (Last, First, Middle Initial)
Bradley S. Miller

Mailing Address 101 SW Main Street
Suite 1100

City Portland State OR Zip Code 97204-3219

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

Name of Employer Ball Janik Occupation Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
290.96

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-PIP572

Amount of Each Receipt this Period
101.26

[MEMO ITEM]
Partnership Itemization Memo

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

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

0.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 68 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
James C. Prichard

Mailing Address 101 SW Main Street
Suite 1100

City Portland State OR Zip Code 97204-3219

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

Name of Employer Ball Janik Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
394.24

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-PIP575

Amount of Each Receipt this Period
134.08

[MEMO ITEM]
Partnership Itemization Memo

B. Full Name (Last, First, Middle Initial)
Steven W. Berglund

Mailing Address 18466 Twin Creeks Road

City Monte Sereno State CA Zip Code 95030-2130

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

Name of Employer Trimble Navigation Occupation President and CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44097

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Jonathan Heafitz

Mailing Address 2704 Emmet Road

City Silver Spring State MD Zip Code 20902-4832

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

Name of Employer Pharmaceutical Care Mgmt. Occupation Senior Dir. Fed & Reg. Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44098

Amount of Each Receipt this Period
250

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 69 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Valerie Henry

Mailing Address 10628 Weybridge Drive

City Tampa State FL Zip Code 33626-1824

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

Name of Employer Stanton Park Group Occupation Policy Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44099

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Lucia Lebens

Mailing Address 161 Barrett Place

City Alexandria State VA Zip Code 22304-7763

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

Name of Employer ACA International Occupation Dir. Federal Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44100

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Stewart Resnick

Mailing Address 11444 W Olympic Boulevard

City Los Angeles State CA Zip Code 90064-1549

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

Name of Employer Roll Global, LLC Occupation Chairman & President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44101

Amount of Each Receipt this Period
1500

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

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

2250.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 70 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Joseph M. Sandri Jr.

Mailing Address 9104 Alton Parkway

City State Zip Code
Silver Spring MD 20910-1635

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

Name of Employer Occupation
Fibertower Corp. SVP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44103

Amount of Each Receipt this Period
300

B. Full Name (Last, First, Middle Initial)
Vance Schuemann

Mailing Address 505 Cathedral Drive

City State Zip Code
Alexandria VA 22314-4705

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

Name of Employer Occupation
Appian Consulting Managing Member

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44104

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Virginia Sessions

Mailing Address 1133 13th Street NW
Apt. 4B

City State Zip Code
Washington DC 20005-4206

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

Name of Employer Occupation
National Down Syndrome Socie Mgr. Grassroots & Development

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44105

Amount of Each Receipt this Period
250

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

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

800.00

**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 71 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Valerie Stackhouse West

Mailing Address 2509 N McKinley Street

City State Zip Code
Arlington VA 22207-1216

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

Name of Employer Occupation
Van Heuvelen Strategies Principle

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : A-CF44106

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Dennis A. Smith

Mailing Address PO Box 12008

City State Zip Code
Salem OR 97309-0008

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

Name of Employer Occupation
Eagle Newspapers, Inc. Publisher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

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

Transaction ID : A-CF44112

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Coquille Indian Tribe

Mailing Address 3050 Tremont Street

City State Zip Code
North Bend OR 97459-3059

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

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

Transaction ID : A-CF44111

Amount of Each Receipt this Period
2600

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

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

4100.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 72 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Lucille R Burt

Mailing Address 3366 Elmwood Court

City Medford State OR Zip Code 97504-8921

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 **475**

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

Transaction ID : A-CF44084

Amount of Each Receipt this Period
 125

B. Full Name (Last, First, Middle Initial)
Gordon Graham

Mailing Address 33956 River View Drive

City Hermiston State OR Zip Code 97838-7303

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 **350**

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

Transaction ID : A-CF44081

Amount of Each Receipt this Period
 100

C. Full Name (Last, First, Middle Initial)
Leo G Graham

Mailing Address PO Box 2170

City Hillsboro State OR Zip Code 97123-1921

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

Name of Employer Gramark Co LLC Occupation Member

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2100**

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

Transaction ID : A-CF44075

Amount of Each Receipt this Period
 100

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

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

325.00

**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 73 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Dennis Hartman

Mailing Address 1748 Glenmorrie Terrace

City State Zip Code
Lake Oswego OR 97034-5051

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
550

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

Transaction ID : A-CF44073

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Daniel E. Jarman

Mailing Address 4169 Casey Court

City State Zip Code
Lake Oswego OR 97034-7245

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

Name of Employer Occupation
CFM Strategic Communications Government Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

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

Transaction ID : A-CF44110

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
William Johnstone

Mailing Address 16727 SW Monterey Lane

City State Zip Code
Portland OR 97224-2111

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

Name of Employer Occupation
Oregon Association of Broadcasters Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550

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

Transaction ID : A-CF44070

Amount of Each Receipt this Period
100

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

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

850.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 74 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Susan K Norland

Mailing Address 2655 Shasta Way
Unit 2

City Klamath Falls State OR Zip Code 97603-4455

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

Name of Employer Hans Norland And Sons Occupation Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **345**

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

Transaction ID : A-CF44085

Amount of Each Receipt this Period
 25

B. Full Name (Last, First, Middle Initial)
James D. Rathbone

Mailing Address 940 NE Raven Court

City Bend State OR Zip Code 97701-8816

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 **1050**

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

Transaction ID : A-CF44080

Amount of Each Receipt this Period
 250

C. Full Name (Last, First, Middle Initial)
Dale E. Benson

Mailing Address 6416 SW Loop Drive

City Portland State OR Zip Code 97221-3385

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 **2950**

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

Transaction ID : A-CF44605

Amount of Each Receipt this Period
 100

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

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

375.00

**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 75 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Eric Forrest

Mailing Address 34105 Country View Drive

City Eugene State OR Zip Code 97408-9440

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

Name of Employer Bigfoot Beverages Occupation Co-President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375**

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

Transaction ID : A-CF44087

Amount of Each Receipt this Period
 250

B. Full Name (Last, First, Middle Initial)
Kristin Forrest

Mailing Address 34105 Country View Drive

City Eugene State OR Zip Code 97408-9440

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

Name of Employer Bigfoot Beverages Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375**

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

Transaction ID : A-CF44088

Amount of Each Receipt this Period
 250

C. Full Name (Last, First, Middle Initial)
Jeffrey Robberson

Mailing Address 891 NW Stonepine Drive

City Bend State OR Zip Code 97701-6814

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

Name of Employer Robberson Ford Occupation Auto Dealer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2700**

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

Transaction ID : A-CF44062

Amount of Each Receipt this Period
 -2400
 refund excessive contribution dated 7/21/2014

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

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

-1900.00

**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 76 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Dave Vogt

Mailing Address **PO Box 818**

City **Sisters** State **OR** Zip Code **97759-0818**

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

Name of Employer **7 Peaks Paving LLC** Occupation **CEO/Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : A-CF44603

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Hillary Bounds

Mailing Address **201 Marshall Street # 323**

City **Redwood City** State **CA** Zip Code **94063-1534**

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

Name of Employer **The William and Flora Hewlet** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

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

Transaction ID : A-CF44614

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Sharla M Moffett

Mailing Address **12682 NW Lilywood Drive**

City **Portland** State **OR** Zip Code **97229-8516**

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**

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

Transaction ID : A-CF44615

Amount of Each Receipt this Period
250

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

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

750.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 77 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Richard H. Rudisile

Mailing Address 3531 Ross Lane

City Central Point State OR Zip Code 97502-1177

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 **775**

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

Transaction ID : A-CF44610

Amount of Each Receipt this Period
 250

B. Full Name (Last, First, Middle Initial)
Jason Scism

Mailing Address 4820 24th Road N

City Arlington State VA Zip Code 22207-2617

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

Name of Employer The Bockorny Group Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : A-CF44607

Amount of Each Receipt this Period
 250

C. Full Name (Last, First, Middle Initial)
Carlos Tambini

Mailing Address 1401 Q Street NW Apt. 205

City Washington State DC Zip Code 20009-7819

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1118.93**

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

Transaction ID : A-CF44606

Amount of Each Receipt this Period
 1000

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 78 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) Lynn Wilson | | Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 18 / 2014 |
| Mailing Address 1015 Eastman Drive | | Transaction ID : A-CF44096 |
| City Bigfork | State MT | Zip Code 59911-6544 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 2400 | |
| Name of Employer None | Occupation Retired | Earmarked through NAB PAC. Conduit received 8/28/2014 |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 2400 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) NAB PAC | | Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 19 / 2014 |
| Mailing Address 1771 N Street NW | | Transaction ID : A-CF44096.e |
| City Washington | State DC | Zip Code 20036-2800 |
| FEC ID number of contributing federal political committee. C C00009985 | Amount of Each Receipt this Period 2400 | |
| Name of Employer | Occupation | [MEMO ITEM] Earmarked-Original Details. Total Earmarked via this conduit: \$37,550.00. PAC limit not affected. |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 37550 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) Gila River Indian Community | | Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 19 / 2014 |
| Mailing Address PO Box 2160 | | Transaction ID : A-CF44298 |
| City Sacaton | State AZ | Zip Code 85147-0055 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 2500 | |
| Name of Employer | Occupation | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 2500 | |

| | |
|---|---------|
| 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 79 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Michael W. Delk

Mailing Address 5653 54th Court SE

City Salem State OR Zip Code 97317-9344

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

Name of Employer Delk's Valley Oil Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **425**

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

Transaction ID : A-CF44621

Amount of Each Receipt this Period
 100

B. Full Name (Last, First, Middle Initial)
Confederated Tribes Grand Ronde

Mailing Address Will Hollier
9615 Grand Ronde Road

City Grand Ronde State OR Zip Code 97347

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

Name of Employer Grand Ronde Tribes Occupation Grand Ronde Tribes

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

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

Transaction ID : A-CF44295

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
David Rhodes

Mailing Address 15570 SW 109th Avenue

City Portland State OR Zip Code 97224-3302

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**

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

Transaction ID : A-CF44113

Amount of Each Receipt this Period
 100

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 80 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Neal L. Eberlein

Mailing Address 1345 N Eldorado Avenue

City Klamath Falls State OR Zip Code 97601-1810

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**

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

Transaction ID : A-CF44632

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Roberta Webber

Mailing Address 19454 Bounty Lake Court

City Bend State OR Zip Code 97702-1155

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**

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

Transaction ID : A-CF44629

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
C.J. Woodward

Mailing Address PO Box 394

City Hood River State OR Zip Code 97031-0014

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

Name of Employer Columbia State Bank Occupation Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

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

Transaction ID : A-CF44291

Amount of Each Receipt this Period
50

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

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

200.00

**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 81 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Noydena Brix

Mailing Address 1412 SW Cardinell Drive

City Portland State OR Zip Code 97201-3132

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
2600

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

Transaction ID : A-CF44121

Amount of Each Receipt this Period
2600

B. Full Name (Last, First, Middle Initial)
Peter J. Brix

Mailing Address 1412 SW Cardinell Drive

City Portland State OR Zip Code 97201-3132

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

Name of Employer Self Occupation Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

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

Transaction ID : A-CF44120

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
David L Cox

Mailing Address 22330 SE Donna Circle

City Damascus State OR Zip Code 97089-8369

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
700

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

Transaction ID : A-CF44123

Amount of Each Receipt this Period
200

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

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

5400.00

**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 82 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Paul H. Dudley Jr.

Mailing Address 60230 Tekampe Road

City Bend State OR Zip Code 97702-9326

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 **600**

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

Transaction ID : A-CF44125

Amount of Each Receipt this Period
 100

B. Full Name (Last, First, Middle Initial)
Wallace B. Eakin

Mailing Address 1809 B Street

City Hood River State OR Zip Code 97031-1378

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 **600**

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

Transaction ID : A-CF44195

Amount of Each Receipt this Period
 200

C. Full Name (Last, First, Middle Initial)
Robert L. Eberhard

Mailing Address 1215 NW Canyon Drive

City Redmond State OR Zip Code 97756-1379

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

Name of Employer Self Occupation Dairyman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

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

Transaction ID : A-CF44244

Amount of Each Receipt this Period
 500

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

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

800.00

**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 83 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Diana P. Evans

Mailing Address 1910 Madrona Avenue S

City Salem State OR Zip Code 97302-3636

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

Name of Employer None Occupation Retired Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

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

Transaction ID : A-CF44233

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Shirleen Green

Mailing Address 1788 NE Squire Drive

City Madras State OR Zip Code 97741-9401

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**

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

Transaction ID : A-CF44189

Amount of Each Receipt this Period
150

C. Full Name (Last, First, Middle Initial)
J. Wallace Gutzler

Mailing Address 4520 Redinger Court S

City Salem State OR Zip Code 97302-2458

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

Name of Employer None Occupation Retired Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

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

Transaction ID : A-CF44209

Amount of Each Receipt this Period
100

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

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

350.00

**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 84 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Harry Hartley

Mailing Address **PO Box 287**

City **Condon** State **OR** Zip Code **97823-0287**

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

Name of Employer **Self** Occupation **Farmer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700**

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

Transaction ID : A-CF44225

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Vera P Henderson

Mailing Address **75241 Upper Diamond Lane**

City **Wallowa** State **OR** Zip Code **97885-8206**

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 **550**

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

Transaction ID : A-CF44237

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Maryanne Hill

Mailing Address **PO Box 67**

City **Government Camp** State **OR** Zip Code **97028-0067**

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

Name of Employer **Self** Occupation **Rentals**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

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

Transaction ID : A-CF44247

Amount of Each Receipt this Period
100

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 85 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Mark B. Holland

Mailing Address 4486 Edison Road NE

City: Silverton State: OR Zip Code: 97381-9565

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

Name of Employer: Holland Collision Service Occupation: Auto Body Shop Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **350**

Date of Receipt: 09 / 23 / 2014

Transaction ID : A-CF44246

Amount of Each Receipt this Period: **100**

B. Full Name (Last, First, Middle Initial)
Barbara Hoppes

Mailing Address PO Box 276

City: Prineville State: OR Zip Code: 97754-0276

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**

Date of Receipt: 09 / 23 / 2014

Transaction ID : A-CF44248

Amount of Each Receipt this Period: **100**

C. Full Name (Last, First, Middle Initial)
W. David Jensen

Mailing Address 3468 Bradley Drive

City: Hood River State: OR Zip Code: 97031-9614

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**

Date of Receipt: 09 / 23 / 2014

Transaction ID : A-CF44192

Amount of Each Receipt this Period: **50**

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

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

250.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 86 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Larry Kaseberg

Mailing Address 69384 Wheatacres Road

City Wasco State OR Zip Code 97065-3074

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

Name of Employer None Occupation Retired Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

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

Transaction ID : A-CF44191

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Eleanora H Larson

Mailing Address 3969 Ridgewood Way

City West Linn State OR Zip Code 97068-1653

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**

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

Transaction ID : A-CF44197

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
James Likowski

Mailing Address 2818 Lilac Street

City Longview State WA Zip Code 98632-3529

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 **215**

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

Transaction ID : A-CF44119

Amount of Each Receipt this Period
50

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

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

350.00

**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 87 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Richard Matza

Mailing Address **PO Box 4643**

City **Portland** State **OR** Zip Code **97208-4643**

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

Name of Employer **Mevko Properties LLC** Occupation **Member**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

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

Transaction ID : A-CF44217

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Sylvia Miller

Mailing Address **PO Box K**

City **Madras** State **OR** Zip Code **97741-0042**

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**

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

Transaction ID : A-CF44200

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Dean N. Morrison

Mailing Address **12250 SW 33rd Avenue**

City **Portland** State **OR** Zip Code **97219-8254**

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

Name of Employer **Self** Occupation **Civil Engineer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1400**

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

Transaction ID : A-CF44203

Amount of Each Receipt this Period
350

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

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

900.00

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

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

FOR LINE NUMBER: PAGE 88 OF 330
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Roger L. Pringle

Mailing Address 7297 SW Ascot Court

City Portland State OR Zip Code 97225-6040

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

Name of Employer The Pringle Company Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

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

Transaction ID : A-CF44126

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Nancy K. Ramsey

Mailing Address 1305 Hermits Way

City The Dalles State OR Zip Code 97058-3806

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**

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

Transaction ID : A-CF44240

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
William L. Ryan

Mailing Address 11322 Modoc Road

City White City State OR Zip Code 97503-9552

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

Name of Employer Self Occupation Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

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

Transaction ID : A-CF44124

Amount of Each Receipt this Period
100

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 89 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
R. Margaret Weis

Mailing Address 11520 SE Sunnyside Road
Apt. 706

City Clackamas State OR Zip Code 97015-4316

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**

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

Transaction ID : A-CF44214

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Benjamin R. Whiteley

Mailing Address 2020 SW Market Street Drive
Apt. 401

City Portland State OR Zip Code 97201-7719

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**

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

Transaction ID : A-CF44242

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Leona M. Yorkston

Mailing Address 2455 SE Lake Road

City Milwaukie State OR Zip Code 97222-7747

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**

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

Transaction ID : A-CF44190

Amount of Each Receipt this Period
100

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

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

600.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 90 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
William Blatchford

Mailing Address **PO Box 2240**

City **Kalama** State **WA** Zip Code **98625-1900**

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

Name of Employer **Self** Occupation **Dentist Business Coaching**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

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

Transaction ID : A-CF44127

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Creed Brattain

Mailing Address **530 Fir Knoll Lane, NE**

City **Salem** State **OR** Zip Code **97317**

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

Name of Employer **Brattain Intntl Trucks** Occupation **Chairman/CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1204.04**

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

Transaction ID : A-CF44164

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Charles Carlbom

Mailing Address **2642 SW Chelmsford Avenue**

City **Portland** State **OR** Zip Code **97201-2267**

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**

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

Transaction ID : A-CF44149

Amount of Each Receipt this Period
100

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

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

550.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 91 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Patsy J. Carlson

Mailing Address 1048 N Court Avenue

City Burns State OR Zip Code 97720-1015

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 **350**

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

Transaction ID : A-CF44157

Amount of Each Receipt this Period
 100

B. Full Name (Last, First, Middle Initial)
John A. Duke

Mailing Address PO Box 430

City Rogue River State OR Zip Code 97537-0430

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

Name of Employer Self Occupation Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

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

Transaction ID : A-CF44635

Amount of Each Receipt this Period
 2600

C. Full Name (Last, First, Middle Initial)
Hewitt Hillis

Mailing Address 7440 Mill Creek Road

City The Dalles State OR Zip Code 97058-9505

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

Name of Employer Oregon Equipment Co Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1350**

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

Transaction ID : A-CF44136

Amount of Each Receipt this Period
 100

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 92 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Penny Krebs

Mailing Address 73654 Highway 74

City State Zip Code
Ione OR 97843-4354

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

Name of Employer Occupation
Self Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

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

Transaction ID : A-CF44188

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Steven L. Lachance

Mailing Address 6620 SW Canby Street

City State Zip Code
Portland OR 97223-9492

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

Name of Employer Occupation
None Retired Doctor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

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

Transaction ID : A-CF44637

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Norman Lent

Mailing Address 3529 Malvern Court

City State Zip Code
Alexandria VA 22304-1852

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

Name of Employer Occupation
Arent Fox Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

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

Transaction ID : A-CF44555

Amount of Each Receipt this Period
500

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 93 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Virginia Lindberg

Mailing Address **PO Box 273**

City **Pendleton** State **OR** Zip Code **97801-0273**

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

Name of Employer **None** Occupation **Retired Farmer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : A-CF44172

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Mary E Long

Mailing Address **20455 Outback**

City **Bend** State **OR** Zip Code **97702-9301**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275**

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

Transaction ID : A-CF44144

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Betty Murray

Mailing Address **4270 Belmont Drive**

City **Hood River** State **OR** Zip Code **97031-9750**

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

Name of Employer **Murray's Furniture Company** Occupation **Vice President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

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

Transaction ID : A-CF44140

Amount of Each Receipt this Period
500

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

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

650.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 94 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Shirley Palmer

Mailing Address 57564 Redding Road

City Hoppner State OR Zip Code 97836-6227

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**

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

Transaction ID : A-CF44303

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Annadale Rooper

Mailing Address 3722 W 8th Street

City The Dalles State OR Zip Code 97058-4434

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**

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

Transaction ID : A-CF44183

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Norman H. Schroth

Mailing Address 398 E Ridgeway Avenue

City Hermiston State OR Zip Code 97838-1848

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

Name of Employer Self Occupation Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650**

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

Transaction ID : A-CF44173

Amount of Each Receipt this Period
250

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 95 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Dennis Tooley

Mailing Address 2440 NW Williams Loop

City Redmond State OR Zip Code 97756-9198

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**

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

Transaction ID : A-CF44304

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Dale L. Turnidge

Mailing Address PO Box 3820

City Salem State OR Zip Code 97302-0820

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

Name of Employer None Occupation Retired Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

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

Transaction ID : A-CF44133

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Judith M. Wells

Mailing Address 8700 NW Puckett Road

City Prineville State OR Zip Code 97754-8067

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**

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

Transaction ID : A-CF44162

Amount of Each Receipt this Period
100

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 350.00 |
| 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 96 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Rugged Enterprises LLC

Mailing Address 4268 Beagle Road

City State Zip Code
White City OR 97503-9511

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2300

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09 | | 25 | | 2014 |

Transaction ID : A-CF44324

Amount of Each Receipt this Period
500

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

B. Full Name (Last, First, Middle Initial)
Patricia Foltz

Mailing Address 4268 Beagle Road

City State Zip Code
White City OR 97503-9511

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

Name of Employer Occupation
Rugged Enterprises, LLC Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2300

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09 | | 25 | | 2014 |

Transaction ID : A-PIP594

Amount of Each Receipt this Period
500

[MEMO ITEM]
Partnership Itemization Memo

C. Full Name (Last, First, Middle Initial)
Jerry Andres

Mailing Address 5353 SW 43rd Street

City State Zip Code
Redmond OR 97756-9096

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

Name of Employer Occupation
Work Horse Solutions Business Operations Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
505

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09 | | 25 | | 2014 |

Transaction ID : A-CF44367

Amount of Each Receipt this Period
250

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

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

750.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 97 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Darrell T. Bains

Mailing Address 2012 NE 158th Avenue

City Portland State OR Zip Code 97230-8243

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**

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

Transaction ID : A-CF44368

Amount of Each Receipt this Period
 100

B. Full Name (Last, First, Middle Initial)
Martin G. Bauer

Mailing Address PO Box 967

City Grants Pass State OR Zip Code 97528-0288

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

Name of Employer Self Occupation Real Estate Investment

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

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

Transaction ID : A-CF44326

Amount of Each Receipt this Period
 150

C. Full Name (Last, First, Middle Initial)
Winston D. Briggs

Mailing Address 1604 Meadow View Drive

City Medford State OR Zip Code 97504-4509

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

Name of Employer None Occupation Retired U.S. Navy

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

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

Transaction ID : A-CF44331

Amount of Each Receipt this Period
 250

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

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

500.00

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

| | | |
|---|--|----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 98 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Ryan Collier

Mailing Address 516 Welcome Way SE

City Salem State OR Zip Code 97302-3932

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

Name of Employer Collier Law Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275**

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

Transaction ID : A-CF44638

Amount of Each Receipt this Period
25

B. Full Name (Last, First, Middle Initial)
Paul S. Cosgrove

Mailing Address 220 NW Skyline Boulevard

City Portland State OR Zip Code 97210-1069

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

Name of Employer Lindsay Hart Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

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

Transaction ID : A-CF44641

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Diane M. DeAutremont

Mailing Address 4910 SW Taylors Ferry Road

City Portland State OR Zip Code 97219-5873

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

Name of Employer Lile International Occupation Owner/Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

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

Transaction ID : A-CF44380

Amount of Each Receipt this Period
250

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

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

525.00

**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 99 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Neal J. Dow

Mailing Address 28000 SE Paulina Highway

City State Zip Code
Prineville OR 97754-9804

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

Name of Employer Occupation
Self Retired DVM/Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

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

Transaction ID : A-CF44353

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Margaret Dunbar

Mailing Address 44819 Jack Mountain Road

City State Zip Code
Frenchglen OR 97736-9709

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

Name of Employer Occupation
Keg Springs Ranch Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

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

Transaction ID : A-CF44350

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
James G Farmer

Mailing Address PO Box 1585

City State Zip Code
Nyssa OR 97913-0085

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

Name of Employer Occupation
Deseret Farms Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
950

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

Transaction ID : A-CF44316

Amount of Each Receipt this Period
250

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

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

600.00

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

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|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 100 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Jerry Gatlin

Mailing Address 235 Barbara Drive

City Grants Pass State OR Zip Code 97526-9306

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**

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

Transaction ID : A-CF44343

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Mary Gerlinger

Mailing Address 2979 Dogwood Court S

City Salem State OR Zip Code 97302-4082

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 **2500**

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

Transaction ID : A-CF44371

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Frank Gill

Mailing Address 1740 SW Military Road

City Portland State OR Zip Code 97219-8384

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

Name of Employer None Occupation Retired Intel Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

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

Transaction ID : A-CF44388

Amount of Each Receipt this Period
1000

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 101 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Sandra Green

Mailing Address 19525 Innes Market Road

City Bend State OR Zip Code 97701-8157

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

Name of Employer N-Link Corporation Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

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

Transaction ID : A-CF44649

Amount of Each Receipt this Period
-2450
 refund excessive contribution dated 9/25/2014

B. Full Name (Last, First, Middle Initial)
Sandra Green

Mailing Address 19525 Innes Market Road

City Bend State OR Zip Code 97701-8157

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

Name of Employer N-Link Corporation Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

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

Transaction ID : A-CF44650

Amount of Each Receipt this Period
2600

C. Full Name (Last, First, Middle Initial)
Virginia S. Grieb

Mailing Address PO Box 308

City Lexington State OR Zip Code 97839-0308

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

Name of Employer None Occupation Retired Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

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

Transaction ID : A-CF44381

Amount of Each Receipt this Period
125

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

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

275.00

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

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

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

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Kenji Hamada

Mailing Address 255 Dawn Allan Drive

City Grants Pass State OR Zip Code 97527-8707

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

Name of Employer None Occupation Retired Optometrist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

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

Transaction ID : A-CF44330

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Paul Hoffstadt

Mailing Address 1225 NE Thousand Oaks Drive

City Corvallis State OR Zip Code 97330-9588

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**

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

Transaction ID : A-CF44299

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Winifred F. Hood

Mailing Address 1802 Wildflower Drive

City Medford State OR Zip Code 97504-8543

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 **650**

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

Transaction ID : A-CF44332

Amount of Each Receipt this Period
100

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

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

400.00

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

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|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 103 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Robert Kimberling

Mailing Address 29713 N River Road

City State Zip Code
Prairie City OR 97869-8223

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

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

Transaction ID : A-CF44360

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
David J. Kremers

Mailing Address 2355 NW Floyd Lane

City State Zip Code
Bend OR 97701-6990

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

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

Transaction ID : A-CF44300

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Linda Miller

Mailing Address PO Box 796

City State Zip Code
Crane OR 97732-0796

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

Name of Employer Occupation
Jerry and Linda Miller Ranch Rancher/Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
205

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

Transaction ID : A-CF44357

Amount of Each Receipt this Period
100

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

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

300.00

**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 104 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Michelle Miller

Mailing Address 33123 Rock Creek Lane

City Frenchglen State OR Zip Code 97736-9708

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

Name of Employer Self Occupation Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250**

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

Transaction ID : A-CF44646

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Edward P Miska

Mailing Address 745 3rd Street

City Lake Oswego State OR Zip Code 97034-2349

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 **810**

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

Transaction ID : A-CF44730

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Barbara L. Nelson

Mailing Address 282 Woodland Drive

City Winston State OR Zip Code 97496-6507

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**

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

Transaction ID : A-CF44320

Amount of Each Receipt this Period
50

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

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

650.00

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

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

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 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Jane H. O'Keeffe

Mailing Address PO Box 115

City Adel State OR Zip Code 97620-0115

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

Name of Employer Self Occupation Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1050**

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

Transaction ID : A-CF44340

Amount of Each Receipt this Period
200

B. Full Name (Last, First, Middle Initial)
Fred Postlewait

Mailing Address 1756 NE Yaquina Heights Drive

City Newport State OR Zip Code 97365-9568

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

Name of Employer Oregon Coast Bank Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : A-CF44727

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Virgil Ridenour

Mailing Address 3250 NW Ice Avenue

City Terrebonne State OR Zip Code 97760-9759

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

Name of Employer None Occupation Retired Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : A-CF44354

Amount of Each Receipt this Period
100

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

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

550.00

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

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|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 106 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
David Schneeberg

Mailing Address 2426 Reed Road

City Hood River State OR Zip Code 97031-8613

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

Name of Employer None Occupation Retired Orchardist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : A-CF44372

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Joseph Simas

Mailing Address 4118 Leonard Road

City Grants Pass State OR Zip Code 97527-9255

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 **230**

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

Transaction ID : A-CF44640

Amount of Each Receipt this Period
25

C. Full Name (Last, First, Middle Initial)
Merlyn Skeen

Mailing Address 2871 Clark Boulevard

City Nyssa State OR Zip Code 97913-5413

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

Name of Employer Self Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **599**

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

Transaction ID : A-CF44318

Amount of Each Receipt this Period
200

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

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

275.00

**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 107 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Daniel M Skotte

Mailing Address **PO Box 3572**

City **Sunriver** State **OR** Zip Code **97707-0572**

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

Name of Employer **Self** Occupation **Physician**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650**

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

Transaction ID : A-CF44642

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Steven K. Stewart

Mailing Address **85658 Dillard Access Road**

City **Eugene** State **OR** Zip Code **97405-9653**

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 **600**

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

Transaction ID : A-CF44319

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Gerald Taylor

Mailing Address **1176 Highwood Drive**

City **Ashland** State **OR** Zip Code **97520-3402**

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 **1100**

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

Transaction ID : A-CF44647

Amount of Each Receipt this Period
100

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

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

450.00

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

| | | |
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| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 108 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Gary Weaver

Mailing Address 2631 Paloma Avenue

City Medford State OR Zip Code 97504-4772

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

Name of Employer None Occupation Unemployed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

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

Transaction ID : A-CF44344

Amount of Each Receipt this Period
 _____ 50

B. Full Name (Last, First, Middle Initial)
Irvin Whiting

Mailing Address 146 Silvercrest Court

City Myrtle Creek State OR Zip Code 97457-8706

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**

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

Transaction ID : A-CF44321

Amount of Each Receipt this Period
 _____ 100

C. Full Name (Last, First, Middle Initial)
Thaddeus R Winnowski

Mailing Address 557 2nd Street

City Lake Oswego State OR Zip Code 97034-3128

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

Name of Employer Self Occupation Investment Banking

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

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

Transaction ID : A-CF44297

Amount of Each Receipt this Period
 _____ 200

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

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

_____ 350.00

**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 109 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Thomas Zelenka

Mailing Address **PO Box 10047**

City **Portland** State **OR** Zip Code **97296-0047**

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

Name of Employer **Schnitzer Steel Industries** Occupation **VP Environmental Affairs**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

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

Transaction ID : A-CF44391

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Cherokee Nation

Mailing Address **PO Box 948**

City **Tahlequah** State **OK** Zip Code **74465-0948**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

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

Transaction ID : A-CF44556

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Duane McDougall

Mailing Address **876 Northshore Road**

City **Lake Oswego** State **OR** Zip Code **97034-3719**

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 **2600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 18 / 2014

Transaction ID : A-PIP586

Amount of Each Receipt this Period
1600

Joint Fundraising Committee

[MEMO ITEM]
Partnership Itemization Memo

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 110 OF 330 | |
| | <input checked="" type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
William A. Furman

Mailing Address 1 Centerpointe Drive
Suite 200

City Lake Oswego State OR Zip Code 97035-8612

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

Name of Employer Greenbrier Companies Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 18 / 2014

Transaction ID : A-PIP584

Amount of Each Receipt this Period
2600

Joint Fundraising Committee

[MEMO ITEM]
Partnership Itemization Memo

B. Full Name (Last, First, Middle Initial)
Nancy M. Phillips

Mailing Address 15025 SW 137th Place

City Tigard State OR Zip Code 97224-1542

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

Name of Employer Self Occupation Community Volunteer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

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

Transaction ID : A-PIP590

Amount of Each Receipt this Period
2600

Joint Fundraising Committee

[MEMO ITEM]
Partnership Itemization Memo

C. Full Name (Last, First, Middle Initial)
George K. Austin Jr.

Mailing Address PO Box 209

City Newberg State OR Zip Code 97132-0209

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

Name of Employer A-dec Inc. Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

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

Transaction ID : A-PIP593

Amount of Each Receipt this Period
2600

Joint Fundraising Committee

[MEMO ITEM]
Partnership Itemization Memo

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

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

0.00

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

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 111 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
William L. Smith

Mailing Address 2334 NW Tower Rock Road

City Bend State OR Zip Code 97701-1020

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

Name of Employer William Smith Properties Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

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

Transaction ID : A-PIP591

Amount of Each Receipt this Period
 2010
Joint Fundraising Committee

[MEMO ITEM]
Partnership Itemization Memo

B. Full Name (Last, First, Middle Initial)
William Glenn

Mailing Address 301 Iron Mountain Boulevard

City Lake Oswego State OR Zip Code 97034-2827

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

Name of Employer Greenbrier Occupation Senior VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 18 / 2014

Transaction ID : A-PIP588

Amount of Each Receipt this Period
 1500
Joint Fundraising Committee

[MEMO ITEM]
Partnership Itemization Memo

C. Full Name (Last, First, Middle Initial)
Larry Williams

Mailing Address PO Box 8126

City Boise State ID Zip Code 83707-2126

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

Name of Employer Tree Top Ranches Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

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

Transaction ID : A-PIP589

Amount of Each Receipt this Period
 2600
Joint Fundraising Committee

[MEMO ITEM]
Partnership Itemization Memo

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

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

0.00

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

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 112 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
John Worries

Mailing Address 401 N Wabash Avenue
Unit 62E

City Chicago State IL Zip Code 60611-3826

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

Name of Employer Amsted Rail Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2014

Transaction ID : A-PIP583

Amount of Each Receipt this Period
2600

Joint Fundraising Committee

[MEMO ITEM]
Partnership Itemization Memo

B. Full Name (Last, First, Middle Initial)
Jane Adams

Mailing Address 4318 SW Fairview Circle

City Portland State OR Zip Code 97221

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

Name of Employer Jane's Vanity Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2014

Transaction ID : A-PIP585

Amount of Each Receipt this Period
2600

Joint Fundraising Committee

[MEMO ITEM]
Partnership Itemization Memo

C. Full Name (Last, First, Middle Initial)
Mark Rittenbaum

Mailing Address 4996 Hampton Court

City Lake Oswego State OR Zip Code 97035-2320

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

Name of Employer Greenbrier Occupation CFO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2014

Transaction ID : A-PIP587

Amount of Each Receipt this Period
2000

Joint Fundraising Committee

[MEMO ITEM]
Partnership Itemization Memo

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

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

0.00

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

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 113 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Daniel Bricken

Mailing Address 311 E Anderson Road

City State Zip Code
Sequim WA 98382-8075

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

Name of Employer Occupation
Wells Fargo Securities Intnt Managing Director - M&A Intntl

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

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

Transaction ID : A-PIP592

Amount of Each Receipt this Period
2600

Joint Fundraising Committee

[MEMO ITEM]
Partnership Itemization Memo

B. Full Name (Last, First, Middle Initial)
Betty Atteberry

Mailing Address 3720 NW Bronson Crest Loop

City State Zip Code
Portland OR 97229-7064

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

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

Transaction ID : A-CF44424

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
William H. Bishop

Mailing Address 6825 SW Raleighwood Lane

City State Zip Code
Portland OR 97225-1924

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
235

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

Transaction ID : A-CF44404

Amount of Each Receipt this Period
50

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

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

150.00

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

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 114 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Gary L. Blahna

Mailing Address 440 Fernwood Drive

City Ashland State OR Zip Code 97520-1612

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 **2225**

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

Transaction ID : A-CF44440

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
John C. Cuthbert

Mailing Address 63502 Sandridge Road

City La Grande State OR Zip Code 97850-5181

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

Name of Employer None Occupation Retired Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

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

Transaction ID : A-CF44397

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Diana Eberhard

Mailing Address 67138 Moses Creek Lane

City Elgin State OR Zip Code 97827-8219

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

Name of Employer Self Occupation Logging

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **265**

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

Transaction ID : A-CF44393

Amount of Each Receipt this Period
100

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

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

1150.00

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

| | | |
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| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 115 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Mary M. Koch

Mailing Address **PO Box CC**

City **Pilot Rock** State **OR** Zip Code **97868-0440**

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

Name of Employer **None** Occupation **Retired Physician**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : A-CF44408

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
John P. Krauss

Mailing Address **200 Corporate Way**

City **Grants Pass** State **OR** Zip Code **97526-6812**

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

Name of Employer **Indian Hill** Occupation **Partner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3525**

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

Transaction ID : A-CF44432

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
William W. Lyons

Mailing Address **14255 NW Bordeaux Lane**

City **Portland** State **OR** Zip Code **97229-7050**

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**

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

Transaction ID : A-CF44737

Amount of Each Receipt this Period
250

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

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

2850.00

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

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 116 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Frank McMillan

Mailing Address 1348 Clearsprings Drive

City Medford State OR Zip Code 97501

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275**

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

Transaction ID : A-CF44435

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Delbert E. Nyman

Mailing Address 2323 NW Stonehill Drive

City Bend State OR Zip Code 97701-6808

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

Name of Employer Chapman Huffman Company Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

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

Transaction ID : A-CF44415

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Walter E. Rebmann

Mailing Address 58 Oak Creek Way

City Lebanon State OR Zip Code 97355-9282

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**

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

Transaction ID : A-CF44405

Amount of Each Receipt this Period
200

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

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

800.00

**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 117 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Stephen E. Smith | | Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2014 |
| Mailing Address 800 Cantrall Road | | Transaction ID : A-CF44436 |
| City Jacksonville | State OR | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200 |
| 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 700 | |

| | | |
|---|--------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Joan L Staunton | | Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2014 |
| Mailing Address 11539 Kestrel Road | | Transaction ID : A-CF44406 |
| City Klamath Falls | State OR | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250 |
| Name of Employer None | Occupation Retired Rancher | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000 | |

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Terry Woodhouse | | Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2014 |
| Mailing Address PO Box N | | Transaction ID : A-CF44430 |
| City Merrill | State OR | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 300 |
| Name of Employer Woodhouse Co. LLC | Occupation Farmer | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 800 | |

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

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

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 118 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Shannon Zerzan

Mailing Address 6907 Andover Dr.

City State Zip Code
Alexandria VA 22307-1702

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
1500

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

Transaction ID : A-CF44732

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Jerome Steffl

Mailing Address 1401 N Oak Street
Apt. 909

City State Zip Code
Arlington VA 22209-3650

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

Name of Employer Occupation
Pharmaceutical Care Mgt Assn VP Federal Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

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

Transaction ID : A-CF44443

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Nancy Baley

Mailing Address PO Box 531

City State Zip Code
Merrill OR 97633-0531

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

Name of Employer Occupation
Walmart Pharmacist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt
 M M / D D / Y Y Y Y
09 / 28 / 2014

Transaction ID : A-CF44742

Amount of Each Receipt this Period
100

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

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

1350.00

**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 119 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Snake River Produce Company LLC

Mailing Address PO Box 1727

City Nyssa State OR Zip Code 97913-0227

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

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

Transaction ID : A-CF44482

Amount of Each Receipt this Period
500

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

B. Full Name (Last, First, Middle Initial)
Kay Riley

Mailing Address PO Box 1727

City Nyssa State OR Zip Code 97913-0227

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

Name of Employer Occupation
Snake River Produce LLC Member/Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1060**

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

Transaction ID : A-PIP580

Amount of Each Receipt this Period
500

[MEMO ITEM]
Partnership Itemization Memo

C. Full Name (Last, First, Middle Initial)
Richard D. Akerman

Mailing Address 919 West Point Road

City Lake Oswego State OR Zip Code 97034-3748

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

Name of Employer Occupation
Brandco Inc Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650**

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

Transaction ID : A-CF44838

Amount of Each Receipt this Period
100

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

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

600.00

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

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 120 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
DeeAnn Amstad

Mailing Address **PO Box 890**

City **Hermiston** State **OR** Zip Code **97838-0890**

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

Name of Employer **Amstad Produce** Occupation **CFO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

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

Transaction ID : A-CF44845

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Kiyoko Baker

Mailing Address **PO Box 823**

City **Rogue River** State **OR** Zip Code **97537-0823**

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**

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

Transaction ID : A-CF44471

Amount of Each Receipt this Period
200

C. Full Name (Last, First, Middle Initial)
Curtis Bennett

Mailing Address **4808 Oakleaf Pass Drive**

City **Medford** State **OR** Zip Code **97504-9426**

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

Name of Employer **D.A. Davidson** Occupation **Senior VP**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

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

Transaction ID : A-CF44469

Amount of Each Receipt this Period
250

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

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

550.00

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

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 121 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Darrell Brett

Mailing Address 1650 North Shore Road

City Lake Oswego State OR Zip Code 97034-3741

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

Name of Employer Self Occupation Physician/Surgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

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

Transaction ID : A-CF44453

Amount of Each Receipt this Period
 2000

B. Full Name (Last, First, Middle Initial)
Shirley Carson

Mailing Address 49774 Kiger Road

City Diamond State OR Zip Code 97722-9322

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

Name of Employer Kiger Ranch Occupation Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

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

Transaction ID : A-CF44508

Amount of Each Receipt this Period
 150

C. Full Name (Last, First, Middle Initial)
Michael W. Dewey

Mailing Address 940 Downs Street S

City Salem State OR Zip Code 97302-5920

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

Name of Employer Self Occupation Governmental Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

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

Transaction ID : A-CF44458

Amount of Each Receipt this Period
 500

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

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

2650.00

**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 122 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Sally Drinkward

Mailing Address 1920 SW Greenwood Road

City Portland State OR Zip Code 97219-8366

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**

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

Transaction ID : A-CF44455

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Fred D. Duckwall

Mailing Address 2600 Blossom Hill Drive

City Hood River State OR Zip Code 97031-9516

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

Name of Employer Duckwall-Pooley Fruit Co. Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

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

Transaction ID : A-CF44503

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Mardelle L. Ebell

Mailing Address 18012 Koehler Lane

City Baker City State OR Zip Code 97814-8416

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**

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

Transaction ID : A-CF44531

Amount of Each Receipt this Period
100

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 123 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Lawrence T. Eschelman

Mailing Address 3585 Cherokee Drive S

City Salem State OR Zip Code 97302-9712

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44844

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Wilmer Fischer

Mailing Address 13681 SW Morgan Road

City Sherwood State OR Zip Code 97140-8435

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**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44499

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Kimberley Fritts

Mailing Address 3847 N River Street

City Arlington State VA Zip Code 22207-4649

FEC ID number of contributing federal political committee. **C**

Name of Employer Podesta Group Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1750**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44847

Amount of Each Receipt this Period
1000

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 124 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Colleen Froerer

Mailing Address 3150 Echo Road

City Nyssa State OR Zip Code 97913-5022

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44468

Amount of Each Receipt this Period
200

B. Full Name (Last, First, Middle Initial)
Mark D. Gibson

Mailing Address 1623 Edgevale Avenue

City Medford State OR Zip Code 97504-3663

FEC ID number of contributing federal political committee. **C**

Name of Employer Siskiyou Transportation Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44470

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Richard Golb

Mailing Address 20215 SE Fernridge Drive

City Camas State WA Zip Code 98607-9462

FEC ID number of contributing federal political committee. **C**

Name of Employer PacificComm Occupation Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4160**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44457

Amount of Each Receipt this Period
980

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1230.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 125 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Joseph H. Gonyea II

Mailing Address **PO Box 269**

City **Springfield** State **OR** Zip Code **97477-0055**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Timber Products Co.** Occupation **Manufacturing/CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : A-CF44483

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Alan F. Gray

Mailing Address **2577 Lausanne Circle**

City **Medford** State **OR** Zip Code **97504-1741**

FEC ID number of contributing federal political committee. **C**

Name of Employer **None** Occupation **Disabled Vet**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : A-CF44545

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
David A. Griffith

Mailing Address **PO Box 1787**

City **The Dalles** State **OR** Zip Code **97058-8008**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **Auto Dealer**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2350**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : A-CF44515

Amount of Each Receipt this Period
150

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 126 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Charles B. Hall Sr.

Mailing Address 19435 NW Skyline Boulevard

City North Plains State OR Zip Code 97133-9203

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**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44524

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Mary Hamada

Mailing Address 4965 Culbertson Drive

City Parkdale State OR Zip Code 97041-7735

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**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44522

Amount of Each Receipt this Period
50

C. Full Name (Last, First, Middle Initial)
Victoria Harris

Mailing Address 251 Fieldbrook Court

City Medford State OR Zip Code 97504-9467

FEC ID number of contributing federal political committee. **C**

Name of Employer Asante Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44546

Amount of Each Receipt this Period
500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 127 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Charles W. Heath

Mailing Address 77820 Sunset Drive

City Cottage Grove State OR Zip Code 97424-9371

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired Logger

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44743

Amount of Each Receipt this Period
 100

B. Full Name (Last, First, Middle Initial)
James S. Heaton

Mailing Address 2408 Rogue Valley Manor Drive

City Medford State OR Zip Code 97504

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**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44548

Amount of Each Receipt this Period
 100

C. Full Name (Last, First, Middle Initial)
Nelson Heckman

Mailing Address PO Box 572

City Canyon City State OR Zip Code 97820-0572

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**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44527

Amount of Each Receipt this Period
 100

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

**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 128 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Betty L. Hook

Mailing Address 274 Parkhill Place

City Grants Pass State OR Zip Code 97527-6028

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 **350**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44489

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Julia Ann Horton

Mailing Address 1122 Spring Street
Unit 318

City Medford State OR Zip Code 97504-2202

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 **600**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44850

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
William Hoyt

Mailing Address 77102 Highway 99

City Cottage Grove State OR Zip Code 97424-9712

FEC ID number of contributing federal political committee. **C**

Name of Employer Hawley Ranch Occupation Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44454

Amount of Each Receipt this Period
500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 129 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Benton H Johnson

Mailing Address 20360 SW Shelley Court

City State Zip Code
Beaverton OR 97007-1108

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired US Coast Guard

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44836

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Delna L Jones

Mailing Address 39692 Camino Templado

City State Zip Code
Indio CA 92203-3711

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
600

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44842

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Daniel S. Jordan

Mailing Address 1090 N Court Avenue

City State Zip Code
Burns OR 97720-1015

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Insurance Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
950

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44516

Amount of Each Receipt this Period
200

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 130 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
David E. King

Mailing Address 17575 Maupin Road

City Malin State OR Zip Code 97632-9710

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44534

Amount of Each Receipt this Period
 500

B. Full Name (Last, First, Middle Initial)
Donna Laney

Mailing Address 31215 S Dryland Road

City Canby State OR Zip Code 97013-8567

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44505

Amount of Each Receipt this Period
 50

C. Full Name (Last, First, Middle Initial)
Richard J. Larson

Mailing Address 16 15th Street

City Hood River State OR Zip Code 97031-1112

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired Fish & Wildlife Biologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44518

Amount of Each Receipt this Period
 250

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

**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 131 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Nan C Lewis

Mailing Address 26210 Willard Road

City Bend State OR Zip Code 97701-9324

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Farming

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44512

Amount of Each Receipt this Period
 100

B. Full Name (Last, First, Middle Initial)
Duane Martin

Mailing Address 2021 State Highway 88

City lone State CA Zip Code 95640-9113

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44538

Amount of Each Receipt this Period
 250

C. Full Name (Last, First, Middle Initial)
Beth McDaniel

Mailing Address 1167 SW 7th Avenue

City Ontario State OR Zip Code 97914-3313

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**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44502

Amount of Each Receipt this Period
 50

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: PAGE 132 OF 330
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Jerry McNerney
 Mailing Address 7430 SW Greens View Court
 City State Zip Code
 Wilsonville OR 97070-9405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired DMD
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 750

Date of Receipt
 M M / D D / Y Y Y Y
 09 29 2014
Transaction ID : A-CF44542
 Amount of Each Receipt this Period
 200

B. Full Name (Last, First, Middle Initial)
Allene Molesworth
 Mailing Address 1656 Walker Farm Road
 City State Zip Code
 Mosier OR 97040-9708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Orchardist
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 350

Date of Receipt
 M M / D D / Y Y Y Y
 09 29 2014
Transaction ID : A-CF44448
 Amount of Each Receipt this Period
 100

C. Full Name (Last, First, Middle Initial)
Carol Moyer
 Mailing Address 19800 SW Touchmark Way
 Apt. 298
 City State Zip Code
 Bend OR 97702-3406
 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

Date of Receipt
 M M / D D / Y Y Y Y
 09 29 2014
Transaction ID : A-CF44447
 Amount of Each Receipt this Period
 200

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 133 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Susan K Norland

Mailing Address 2655 Shasta Way
Unit 2

City Klamath Falls State OR Zip Code 97603-4455

FEC ID number of contributing federal political committee. **C**

Name of Employer Hans Norland And Sons Occupation Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **345**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44837

Amount of Each Receipt this Period
 25

B. Full Name (Last, First, Middle Initial)
Robert Nosler

Mailing Address 3375 NW Starview Drive

City Bend State OR Zip Code 97701-1146

FEC ID number of contributing federal political committee. **C**

Name of Employer Nosler, Inc. Occupation CEO/Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44841

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
William C. Ransom

Mailing Address 2915 Ivan Lane

City Klamath Falls State OR Zip Code 97603-8940

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44449

Amount of Each Receipt this Period
 200

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1225.00 |
| 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 134 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Herbert Robb

Mailing Address 3431 S Pacific Highway
Space 118

City Medford State OR Zip Code 97501-8829

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **405**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44544

Amount of Each Receipt this Period
 100

B. Full Name (Last, First, Middle Initial)
William L. Ryan

Mailing Address 11322 Modoc Road

City White City State OR Zip Code 97503-9552

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44549

Amount of Each Receipt this Period
 50

C. Full Name (Last, First, Middle Initial)
June Sanders

Mailing Address 19355 Sprague River Road

City Chiloquin State OR Zip Code 97624-8609

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44475

Amount of Each Receipt this Period
 50

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

200.00

**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 135 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Donald G. Starr

Mailing Address 10106 Leonard Lane

City State Zip Code
Island City OR 97850-8519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pump and Irrigation Store Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
09 29 2014

Transaction ID : A-CF44464

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
George A. Stonecliffe

Mailing Address 10962 NW Lucerne Court

City State Zip Code
Portland OR 97229-6169

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

Date of Receipt
 M M / D D / Y Y Y Y
09 29 2014

Transaction ID : A-CF44526

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
G. Bruce Thow

Mailing Address 294 SE Soft Tail Drive

City State Zip Code
Bend OR 97702-9342

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350

Date of Receipt
 M M / D D / Y Y Y Y
09 29 2014

Transaction ID : A-CF44490

Amount of Each Receipt this Period
50

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 400.00 |
| 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 136 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Robert E. Vaughn

Mailing Address 2281 Hillside Drive

City State Zip Code
Central Point OR 97502-1307

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired Construction Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44537

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Craig Wanichuk

Mailing Address 2090 Oakmont Way

City State Zip Code
Eugene OR 97401-2373

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Summit Bank Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44474

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Rebecca Wolfe

Mailing Address 70389 Baker Road

City State Zip Code
Wallowa OR 97885-8111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Rancher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44539

Amount of Each Receipt this Period
100

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 137 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Grace Yamaki

Mailing Address 1771 Eastside Road

City Hood River State OR Zip Code 97031-9562

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**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44506

Amount of Each Receipt this Period
50

B. Full Name (Last, First, Middle Initial)
Agi Bofferding

Mailing Address PO Box 539

City Hood River State OR Zip Code 97031-0017

FEC ID number of contributing federal political committee. **C**

Name of Employer Stearns Lending, LLC Occupation Mortgage Broker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF44861

Amount of Each Receipt this Period
100

C. Full Name (Last, First, Middle Initial)
Richard Borgman

Mailing Address 20492 Pine Vista Drive

City Bend State OR Zip Code 97702-9437

FEC ID number of contributing federal political committee. **C**

Name of Employer Les Schwab Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4000**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF44591

Amount of Each Receipt this Period
1000

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 138 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Richard D Boyd

Mailing Address 13505 NE 287th Circle

City State Zip Code
Battle Ground WA 98604-7522

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired Boyd Coffee Co.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 30 2014

Transaction ID : A-CF45089

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
John D. Bryan

Mailing Address PO Box 1929

City State Zip Code
Lake Oswego OR 97035-0019

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 30 2014

Transaction ID : A-CF44592

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Gordon Dickerson

Mailing Address 2202 Quail Point Terrace

City State Zip Code
Medford OR 97504-4515

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Retired Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 30 2014

Transaction ID : A-CF45085

Amount of Each Receipt this Period
50

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 139 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Barry M Faulkner

Mailing Address **PO Box 630**

City **Prineville** State **OR** Zip Code **97754-0628**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Faulkner Petroleum Geology** Occupation **Geologist**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF44590

Amount of Each Receipt this Period
100

B. Full Name (Last, First, Middle Initial)
Carl W Foster

Mailing Address **4324 SE 178th Place**

City **Vancouver** State **WA** Zip Code **98683-2800**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **CPA**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF44868

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Howard Gonser

Mailing Address **391 Summit Ridge Drive E**

City **The Dalles** State **OR** Zip Code **97058-9763**

FEC ID number of contributing federal political committee. **C**

Name of Employer **None** Occupation **Retired Health Educator**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **260**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF45080

Amount of Each Receipt this Period
50

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 140 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Wayne Holm

Mailing Address 15209 NW Mason Hill Road

City North Plains State OR Zip Code 97133-8196

FEC ID number of contributing federal political committee. **C**

Name of Employer Oregon-Canadian Forest Produ Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1850**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF44859

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Stephen Lindley

Mailing Address 66946 Miller Lane

City Union State OR Zip Code 97883-9132

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Steve Lindley Contracting Occupation General Contractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF45090

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Theodore C. Lyster III

Mailing Address PO Box 28

City Bend State OR Zip Code 97709-0028

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 **825**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF44599

Amount of Each Receipt this Period
100

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

850.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 141 OF 330

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
David Markham

Mailing Address 60760 Gosney Road

City Bend State OR Zip Code 97702-9657

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Electric Coop Occupation President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF45096

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Frank McCarthy

Mailing Address 2332 N Early Street

City Alexandria State VA Zip Code 22302-1705

FEC ID number of contributing federal political committee. **C**

Name of Employer The Keelen Group Occupation Public Relations & Advocacy

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF44852

Amount of Each Receipt this Period
500

C. Full Name (Last, First, Middle Initial)
Barbara McDougall

Mailing Address 876 Northshore Road

City Lake Oswego State OR Zip Code 97034-3719

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Community Volunteer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF44986

Amount of Each Receipt this Period
250

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 142 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Edward P Miska

Mailing Address 745 3rd Street

City Lake Oswego State OR Zip Code 97034-2349

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 **810**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF45093

Amount of Each Receipt this Period
 100

B. Full Name (Last, First, Middle Initial)
Lovella I. Moore

Mailing Address 3600 Westover Boulevard

City Central Point State OR Zip Code 97502-1345

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**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF44867

Amount of Each Receipt this Period
 100

C. Full Name (Last, First, Middle Initial)
Grant Newton

Mailing Address 4766 Andrews Road

City Medford State OR Zip Code 97501-9688

FEC ID number of contributing federal political committee. **C**

Name of Employer AIRA Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2100**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF45110

Amount of Each Receipt this Period
 100

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

**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 143 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Thomas L. Peters

Mailing Address **PO Box 457**

City **Dufur** State **OR** Zip Code **97021-0457**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Deere Run Farms** Occupation **Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF44857

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Kim Pickett

Mailing Address **3440 Karges Way**

City **Medford** State **OR** Zip Code **97504-9395**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **Computer Software**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF44587

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Donald F. Plumb

Mailing Address **3119 Douglas Circle**

City **Lake Oswego** State **OR** Zip Code **97035-3550**

FEC ID number of contributing federal political committee. **C**

Name of Employer **None** Occupation **Retired Ophthamologist**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF45078

Amount of Each Receipt this Period
100

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

**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 144 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Michael S. Scrivner

Mailing Address 1200 New Hampshire Avenue NW
Suite 800

City Washington State DC Zip Code 20036-6805

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dow Lohnes Govt Strategies VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF44759

Amount of Each Receipt this Period
500

B. Full Name (Last, First, Middle Initial)
Steve Sherman

Mailing Address 19065 Nixon Avenue

City West Linn State OR Zip Code 97068-2154

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Direct Marketing Solutions President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF44583

Amount of Each Receipt this Period
250

C. Full Name (Last, First, Middle Initial)
Peter W. Stott

Mailing Address 2896 SW Patton Road

City Portland State OR Zip Code 97201-1695

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Columbia Investments, Ltd. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF44865

Amount of Each Receipt this Period
1600

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 145 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
G. Bruce Thow

Mailing Address 294 SE Soft Tail Drive

City Bend State OR Zip Code 97702-9342

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 **350**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF45103

Amount of Each Receipt this Period
 25

B. Full Name (Last, First, Middle Initial)
Jon Tompkins

Mailing Address 61708 Broken Top Drive

City Bend State OR Zip Code 97702-1088

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**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF45104

Amount of Each Receipt this Period
 1000

C. Full Name (Last, First, Middle Initial)
Brian Wild

Mailing Address 7616 Range Road

City Alexandria State VA Zip Code 22306-2424

FEC ID number of contributing federal political committee. **C**

Name of Employer Mehlman Castagnetti Rosen an Occupation Government Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF44851

Amount of Each Receipt this Period
 1000

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 146 OF 330 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Michael R Wilson

Mailing Address 18721 Fernwood Road

City Hidden Valley Lake State CA Zip Code 95467-8236

FEC ID number of contributing federal political committee. **C**

Name of Employer Bicoastal Media Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **970**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF44854

Amount of Each Receipt this Period
 100

B. Full Name (Last, First, Middle Initial)
Harland Yriarte

Mailing Address 37397 Riverside Drive

City Pleasant Hill State OR Zip Code 97455-9791

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired Teacher/Coach

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **950**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF45079

Amount of Each Receipt this Period
 200

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

166840.20

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 147 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
CropLife America

Mailing Address 1156 15th Street NW
Suite 400

City Washington State DC Zip Code 20005-1752

FEC ID number of contributing federal political committee. **C C00248849**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 07 / 2014

Transaction ID : A-CF43646

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
CropLife America

Mailing Address 1156 15th Street NW
Suite 400

City Washington State DC Zip Code 20005-1752

FEC ID number of contributing federal political committee. **C C00248849**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 07 / 2014

Transaction ID : A-CF43647

Amount of Each Receipt this Period
1500

C. Full Name (Last, First, Middle Initial)
American Institute of CPAs PAC

Mailing Address 220 Leigh Farm Road
Palladian 1

City Durham State NC Zip Code 27707-8110

FEC ID number of contributing federal political committee. **C C00077321**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 09 / 2014

Transaction ID : A-IF45185

Amount of Each Receipt this Period
452.36
Inkind: fundraiser room rental, catering

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4452.36

**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 148 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
American Fuel and Petrochemical Manufacturers Assn PAC

Mailing Address 1667 K Street NW
Suite 700

City Washington State DC Zip Code 20006-1654

FEC ID number of contributing federal political committee. **C C00415026**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 11 / 2014

Transaction ID : A-CF43653

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
ExelonPAC

Mailing Address 101 Constitution Avenue NW
Suite 400E

City Washington State DC Zip Code 20001-2137

FEC ID number of contributing federal political committee. **C C00141218**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 11 / 2014

Transaction ID : A-CF43654

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Liberty Interactive PAC

Mailing Address 12300 Liberty Boulevard

City Englewood State CO Zip Code 80112-7009

FEC ID number of contributing federal political committee. **C C00442434**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 11 / 2014

Transaction ID : A-CF43655

Amount of Each Receipt this Period
1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 149 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Liberty Media PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 12300 Liberty Boulevard
 City Englewood State CO Zip Code 80112-7009
 FEC ID number of contributing federal political committee. **C** C00508101
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 3000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 11 / 2014
Transaction ID : A-CF43656
 Amount of Each Receipt this Period
 1000

B. Tuesday Group PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 11586
 City Washington State DC Zip Code 20008-0786
 FEC ID number of contributing federal political committee. **C** C00433060
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 11 / 2014
Transaction ID : A-CF43651
 Amount of Each Receipt this Period
 2500

C. American Institute of CPAs PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 Leigh Farm Road
 Padian 1
 City Durham State NC Zip Code 27707-8110
 FEC ID number of contributing federal political committee. **C** C00077321
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2014
Transaction ID : A-CF43870
 Amount of Each Receipt this Period
 1500

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 150 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
IntegraPAC

Mailing Address 3213 Duke Street
Suite 246

City Alexandria State VA Zip Code 22314-4533

FEC ID number of contributing federal political committee. **C** C00428094

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500

Date of Receipt
M M / D D / Y Y Y Y
07 / 18 / 2014

Transaction ID : A-CF43871

Amount of Each Receipt this Period
2000

B. Full Name (Last, First, Middle Initial)
K&L Gates PAC

Mailing Address 1601 K Street NW

City Washington State DC Zip Code 20006-1682

FEC ID number of contributing federal political committee. **C** C00213173

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
M M / D D / Y Y Y Y
07 / 18 / 2014

Transaction ID : A-CF43872

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
KPMG PAC

Mailing Address PO Box 18254

City Washington State DC Zip Code 20036-8254

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500

Date of Receipt
M M / D D / Y Y Y Y
07 / 18 / 2014

Transaction ID : A-CF43873

Amount of Each Receipt this Period
1500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 151 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. PriceWaterhouseCoopers PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 13th Street NW
 Suite 1000
 City Washington State DC Zip Code 20005-3005
 FEC ID number of contributing federal political committee. **C C00107235**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2014
Transaction ID : A-CF43874
 Amount of Each Receipt this Period
 1500

B. Tipperary Hill PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 228 S Washington Street
 Suite 115
 City Alexandria State VA Zip Code 22314-5404
 FEC ID number of contributing federal political committee. **C C00225623**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2014
Transaction ID : A-CF43875
 Amount of Each Receipt this Period
 1000

C. XO Communications Inc. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 13865 Sunrise Valley Drive
 Floor 4
 City Herndon State VA Zip Code 20171-6187
 FEC ID number of contributing federal political committee. **C C00342238**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 7000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2014
Transaction ID : A-CF43876
 Amount of Each Receipt this Period
 2500

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 152 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
American Assn of Nurse Anesthetists PAC

Mailing Address 25 Massachusetts Avenue NW
Suite 550

City Washington State DC Zip Code 20001-1408

FEC ID number of contributing federal political committee. **C C00173153**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 21 / 2014

Transaction ID : A-CF43868

Amount of Each Receipt this Period
3000

B. Full Name (Last, First, Middle Initial)
American Health Care Association PAC

Mailing Address 1201 L Street NW

City Washington State DC Zip Code 20005-4024

FEC ID number of contributing federal political committee. **C C00006080**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 21 / 2014

Transaction ID : A-CF43869

Amount of Each Receipt this Period
4000

C. Full Name (Last, First, Middle Initial)
Exxon Mobil Corporation PAC

Mailing Address 2000 K Street NW
Suite 710

City Washington State DC Zip Code 20006-1803

FEC ID number of contributing federal political committee. **C C00121368**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 24 / 2014

Transaction ID : A-CF43867

Amount of Each Receipt this Period
2500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

9500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 153 OF 330
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Alliance Data-Epsilon PAC

Mailing Address 7500 Dallas Parkway
Floor 7

City State Zip Code
Plano TX 75024-4019

FEC ID number of contributing federal political committee. **C** C00551812

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014

Transaction ID : A-CF43851

Amount of Each Receipt this Period
5000

B. Full Name (Last, First, Middle Initial)
Areva PAC

Mailing Address 4800 Hampden Lane

City State Zip Code
Bethesda MD 20814-2930

FEC ID number of contributing federal political committee. **C** C00395285

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014

Transaction ID : A-CF43852

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Brownstein Hyatt Farber Schreck PAC

Mailing Address 410 17th Street
Suite 2200

City State Zip Code
Denver CO 80202-4432

FEC ID number of contributing federal political committee. **C** C00390583

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014

Transaction ID : A-CF43853

Amount of Each Receipt this Period
2000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8000.00

**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 154 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Caithness Corporation PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 565 5th Avenue
 Floor 29
 City New York State NY Zip Code 10017-2478
 FEC ID number of contributing federal political committee. **C C00371062**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : A-CF43854
 Amount of Each Receipt this Period
 500

B. Cox Enterprises PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 975 F Street NW
 Suite 300
 City Washington State DC Zip Code 20004-1459
 FEC ID number of contributing federal political committee. **C C00477653**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 9000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : A-CF43855
 Amount of Each Receipt this Period
 5000

C. CTIA PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1400 16th Street NW
 Suite 600
 City Washington State DC Zip Code 20036-2225
 FEC ID number of contributing federal political committee. **C C00262295**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 3500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : A-CF43856
 Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

6500.00

**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 155 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Deloitte Federal PAC

Mailing Address **PO Box 365**

City **Washington** State **DC** Zip Code **20044-0365**

FEC ID number of contributing federal political committee. **C C00211318**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 25 / 2014

Transaction ID : A-CF43857

Amount of Each Receipt this Period
1500

B. Full Name (Last, First, Middle Initial)
Ernst & Young PAC

Mailing Address **1101 New York Avenue NW**

City **Washington** State **DC** Zip Code **20005-4269**

FEC ID number of contributing federal political committee. **C C00227744**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 25 / 2014

Transaction ID : A-CF43858

Amount of Each Receipt this Period
2000

C. Full Name (Last, First, Middle Initial)
Ion Media Networks PAC

Mailing Address **601 Clearwater Park Road**

City **West Palm Beach** State **FL** Zip Code **33401-6233**

FEC ID number of contributing federal political committee. **C C00513606**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5600

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 25 / 2014

Transaction ID : A-CF43859

Amount of Each Receipt this Period
2600

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6100.00

**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 156 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Level 3 Communications Inc. PAC

Mailing Address 1025 Eldorado Boulevard

City Broomfield State CO Zip Code 80021-8254

FEC ID number of contributing federal political committee. **C** C00347385

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014

Transaction ID : A-CF43725

Amount of Each Receipt this Period
 -500
 refund excessive contribution dated 7/25/2014

B. Full Name (Last, First, Middle Initial)
Level 3 Communications Inc. PAC

Mailing Address 1025 Eldorado Boulevard

City Broomfield State CO Zip Code 80021-8254

FEC ID number of contributing federal political committee. **C** C00347385

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014

Transaction ID : A-CF43860

Amount of Each Receipt this Period
 2000

C. Full Name (Last, First, Middle Initial)
PuroPAC

Mailing Address 300 New Jersey Avenue NW
Suite 900

City Washington State DC Zip Code 20001-2271

FEC ID number of contributing federal political committee. **C** C00507053

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014

Transaction ID : A-CF43861

Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 157 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Sprint Nextel PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 7th Street NW
 Suite 700
 City Washington State DC Zip Code 20001-4185
 FEC ID number of contributing federal political committee. **C C00089342**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **8000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : A-CF43862
 Amount of Each Receipt this Period
 1500

B. The Axiom Corporation Associates PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 E 3rd Street
 City Little Rock State AR Zip Code 72201-1709
 FEC ID number of contributing federal political committee. **C C00350835**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **1500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : A-CF43850
 Amount of Each Receipt this Period
 1500

C. Time Warner Inc. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Connecticut Avenue NW
 Suite 1200
 City Washington State DC Zip Code 20006-2709
 FEC ID number of contributing federal political committee. **C C00339291**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **4500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2014
Transaction ID : A-CF43863
 Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 158 OF 330
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Twenty-First Century Fox PAC

Mailing Address 444 N Capitol Street NW
Suite 740

City Washington State DC Zip Code 20001-1512

FEC ID number of contributing federal political committee. **C C00330019**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 25 / 2014

Transaction ID : A-CF43864

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
National Association of Convenience Stores PAC

Mailing Address 1600 Duke Street

City Alexandria State VA Zip Code 22314-3466

FEC ID number of contributing federal political committee. **C C00126763**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 28 / 2014

Transaction ID : A-CF43865

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Aircraft Owners and Pilots Association PAC

Mailing Address 421 Aviation Way

City Frederick State MD Zip Code 21701-4756

FEC ID number of contributing federal political committee. **C C00131185**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 01 / 2014

Transaction ID : A-CF43839

Amount of Each Receipt this Period
1000

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 159 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Valero PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 801 Penn Avenue NW
 Suite 200
 City Washington State DC Zip Code 20004-2615
 FEC ID number of contributing federal political committee. **C C00109546**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 5000

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 01 / 2014
Transaction ID : A-CF43840
 Amount of Each Receipt this Period
 5000

B. American College of Surgeons Professional Association PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 F Street NW
 Suite 1000
 City Washington State DC Zip Code 20001-6701
 FEC ID number of contributing federal political committee. **C C00382424**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 4500

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014
Transaction ID : A-CF43744
 Amount of Each Receipt this Period
 1500

C. Health Net Inc PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2107 Wilson Boulevard
 Suite 900
 City Arlington State VA Zip Code 22201-3096
 FEC ID number of contributing federal political committee. **C C00230789**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 5000

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014
Transaction ID : A-CF43745
 Amount of Each Receipt this Period
 1500

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

8000.00

**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 160 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Oregon Smith Fund

Mailing Address 711 Medford Center
Suite 102

City Medford State OR Zip Code 97504-6772

FEC ID number of contributing federal political committee. **C** C00146886

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4050

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : A-CF43741

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Orrick, Herrington & Sutcliffe PAC

Mailing Address 405 Howard Street

City San Francisco State CA Zip Code 94105-2625

FEC ID number of contributing federal political committee. **C** C00220558

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : A-CF43743

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
PGE Bipartisan Committee

Mailing Address 121 SW Salmon, 1WTC 3

City Portland State OR Zip Code 97204

FEC ID number of contributing federal political committee. **C** C00381020

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : A-CF43742

Amount of Each Receipt this Period
1500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 161 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Oregon Smith Fund
 Full Name (Last, First, Middle Initial)
 Mailing Address 711 Medford Center
 Suite 102
 City Medford State OR Zip Code 97504-6772
 FEC ID number of contributing federal political committee. **C C00146886**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 4050

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2014
Transaction ID : A-CF43838
 Amount of Each Receipt this Period
 50

B. Boeing Company PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 Wilson Boulevard
 City Arlington State VA Zip Code 22209-2300
 FEC ID number of contributing federal political committee. **C C00142711**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2014
Transaction ID : A-CF43842
 Amount of Each Receipt this Period
 1000

C. American Association of Nurse Practitioners PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 Reinekers Lane
 City Alexandria State VA Zip Code 22314-2856
 FEC ID number of contributing federal political committee. **C C00358903**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 7500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014
Transaction ID : A-CF43733
 Amount of Each Receipt this Period
 5000

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

6050.00

**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 162 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Bechtel PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 750 9th Street NW
 Suite 450
 City Washington State DC Zip Code 20001-4577
 FEC ID number of contributing federal political committee. **C C00103697**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **6000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014
Transaction ID : A-CF43734
 Amount of Each Receipt this Period
 3000

B. Employees of Northrop Grumman Corporation PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2980 Fairview Park Drive
 City Falls Church State VA Zip Code 22042-4511
 FEC ID number of contributing federal political committee. **C C00088591**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **10000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014
Transaction ID : A-CF43736
 Amount of Each Receipt this Period
 1000

C. Investment Company Institute PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1401 H Street NW
 Suite 1200
 City Washington State DC Zip Code 20005-2110
 FEC ID number of contributing federal political committee. **C C00105981**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **5000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014
Transaction ID : A-CF43735
 Amount of Each Receipt this Period
 2500

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

6500.00

**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 163 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Safeway Inc. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 5918 Stoneridge Mall Road
 City Pleasanton State CA Zip Code 94588-3229
 FEC ID number of contributing federal political committee. **C C00194084**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **3500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014
Transaction ID : A-CF43737
 Amount of Each Receipt this Period
 1000

B. Tenaska Employees PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1044 N 115th Street Suite 400
 City Omaha State NE Zip Code 68154-4410
 FEC ID number of contributing federal political committee. **C C00479998**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014
Transaction ID : A-CF43738
 Amount of Each Receipt this Period
 1000

C. TIAA-CREF PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 Pennsylvania Avenue NW Suite 800
 City Washington State DC Zip Code 20004-2526
 FEC ID number of contributing federal political committee. **C C00431361**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014
Transaction ID : A-CF43739
 Amount of Each Receipt this Period
 1000

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 164 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Windstream Corporation PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1101 17th Street NW
Suite 802

City Washington State DC Zip Code 20036-4718

FEC ID number of contributing federal political committee. **C** C00425975

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2014

Transaction ID : A-CF43740

Amount of Each Receipt this Period
 2000

B. American Osteopathic Association PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1090 Vermont Avenue NW
Suite 500

City Washington State DC Zip Code 20005-4905

FEC ID number of contributing federal political committee. **C** C00113803

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2014

Transaction ID : A-CF43880

Amount of Each Receipt this Period
 1000

C. Chevron Employees PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1401 Eye Street NW
Suite 1200

City Washington State DC Zip Code 20005-2225

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2014

Transaction ID : A-CF43881

Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 165 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. FMR LLC PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 82 Devonshire Street
 # N5A
 City Boston State MA Zip Code 02109-3605
 FEC ID number of contributing federal political committee. **C** C00380550
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 3000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2014
Transaction ID : A-CF43882
 Amount of Each Receipt this Period
 1000

B. American Medical Association PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 Massachusetts Avenue NW
 Suite 600
 City Washington State DC Zip Code 20001-7400
 FEC ID number of contributing federal political committee. **C** C00000422
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2014
Transaction ID : A-CF43835
 Amount of Each Receipt this Period
 5000

C. General Electric Co. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1299 Pennsylvania Avenue NW
 Suite 900W
 City Washington State DC Zip Code 20004-2400
 FEC ID number of contributing federal political committee. **C** C00024869
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 6500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2014
Transaction ID : A-CF43836
 Amount of Each Receipt this Period
 2000

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

8000.00

**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 166 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Political Education Fund of the BCTD

Full Name (Last, First, Middle Initial)
Mailing Address 815 16th Street NW
Suite 600

City Washington State DC Zip Code 20006-4101

FEC ID number of contributing federal political committee. **C C00003160**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2014

Transaction ID : A-CF43837

Amount of Each Receipt this Period
1000

B. Advanced Medical Technology PAC

Full Name (Last, First, Middle Initial)
Mailing Address 701 Pennsylvania Avenue NW
Suite 800

City Washington State DC Zip Code 20004-2654

FEC ID number of contributing federal political committee. **C C00340356**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : A-CF43994

Amount of Each Receipt this Period
1000

C. American Ambulance Association PAC

Full Name (Last, First, Middle Initial)
Mailing Address 8400 Westpark Drive
Floor 2

City McLean State VA Zip Code 22102-5116

FEC ID number of contributing federal political committee. **C C00168070**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : A-CF43995

Amount of Each Receipt this Period
1500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

**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 167 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Charter Communications PAC

Full Name (Last, First, Middle Initial)
Charter Communications PAC

Mailing Address 400 Atlantic Street
Floor 10

City State Zip Code
Stamford CT 06901-3512

FEC ID number of contributing federal political committee. **C** C00426775

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : A-CF43996

Amount of Each Receipt this Period
2000

B. Cisco Systems E-PAC

Full Name (Last, First, Middle Initial)
Cisco Systems E-PAC

Mailing Address 601 Pennsylvania Avenue NW
Suite 90

City State Zip Code
Washington DC 20004-2601

FEC ID number of contributing federal political committee. **C** C00362707

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : A-CF43997

Amount of Each Receipt this Period
5000

C. Marathon Petroleum Corporation Employees PAC

Full Name (Last, First, Middle Initial)
Marathon Petroleum Corporation Employees PAC

Mailing Address 1201 F Street NW
Suite 625

City State Zip Code
Washington DC 20004-1256

FEC ID number of contributing federal political committee. **C** C00496307

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : A-CF43998

Amount of Each Receipt this Period
5000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

12000.00

**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 168 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Associated General Contractors PAC

Full Name (Last, First, Middle Initial)
Mailing Address 53 D Street SE

City Washington State DC Zip Code 20003-4017

FEC ID number of contributing federal political committee. **C** C00082917

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : A-CF43999

Amount of Each Receipt this Period
 1500

B. Investment Company Institute PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1401 H Street NW Suite 1200

City Washington State DC Zip Code 20005-2110

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : A-CF44000

Amount of Each Receipt this Period
 2500

C. National Association of Realtors PAC

Full Name (Last, First, Middle Initial)
Mailing Address 500 New Jersey Avenue NW

City Washington State DC Zip Code 20001-2005

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : A-CF44001

Amount of Each Receipt this Period
 4000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8000.00

**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 169 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
IPAA Wildcatters Fund

Mailing Address 1201 15th Street NW
Suite 300

City Washington State DC Zip Code 20005-2842

FEC ID number of contributing federal political committee. **C** C00246306

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : A-CF44003

Amount of Each Receipt this Period
1500

B. Full Name (Last, First, Middle Initial)
USAA Employee PAC

Mailing Address 601 Pennsylvania Avenue NW
Suite 225 North Tower

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00164145

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : A-CF44002

Amount of Each Receipt this Period
5000

C. Full Name (Last, First, Middle Initial)
Daiichi Sankyo, Inc. Employee PAC

Mailing Address 1825 K Street NW
Suite 425

City Washington State DC Zip Code 20006-1258

FEC ID number of contributing federal political committee. **C** C00441204

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : A-CF44004

Amount of Each Receipt this Period
2000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 170 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Diageo PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 Pennsylvania Avenue SE
 Suite 304
 City Washington State DC Zip Code 20003-4345
 FEC ID number of contributing federal political committee. **C C00034470**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
8047.32

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2014
Transaction ID : A-IF45181
 Amount of Each Receipt this Period
3202.24
 Inkind: fundraising event refreshments

B. Phillips 66 PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1201 K Street
 Suite 1930
 City Sacramento State CA Zip Code 95814-3919
 FEC ID number of contributing federal political committee. **C C00513549**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2014
Transaction ID : A-CF44012
 Amount of Each Receipt this Period
1000

C. Hardwood Federation PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1111 19th Street NW
 Suite 800
 City Washington State DC Zip Code 20036-3652
 FEC ID number of contributing federal political committee. **C C00396671**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 10 / 2014
Transaction ID : A-CF44010
 Amount of Each Receipt this Period
1000

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

5202.24

**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 171 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. INTEL PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1155 F Street NW
 Suite 1025
 City Washington State DC Zip Code 20004-1342
 FEC ID number of contributing federal political committee. **C C00125641**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 7000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014
Transaction ID : A-CF44009
 Amount of Each Receipt this Period
 5000

B. Metlife Employees' Political Participation Fund
 Full Name (Last, First, Middle Initial)
 Mailing Address 1095 Avenue Of The Americas
 City New York State NY Zip Code 10036-6797
 FEC ID number of contributing federal political committee. **C C00040923**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014
Transaction ID : A-CF44008
 Amount of Each Receipt this Period
 1000

C. National Association of Convenience Stores PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1600 Duke Street
 City Alexandria State VA Zip Code 22314-3466
 FEC ID number of contributing federal political committee. **C C00126763**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 10000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014
Transaction ID : A-CF44007
 Amount of Each Receipt this Period
 4000

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

10000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 172 OF 330
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Rural Cellular Association PAC

Mailing Address 805 15th Street NW
Suite 401

City Washington State DC Zip Code 20005-6533

FEC ID number of contributing federal political committee. **C** C00490698

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : A-CF44006

Amount of Each Receipt this Period
 2500

B. Full Name (Last, First, Middle Initial)
TW Telecom Inc. PAC

Mailing Address 1730 Rhode Island Avenue NW
Suite 317

City Washington State DC Zip Code 20036-3119

FEC ID number of contributing federal political committee. **C** C00355941

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 9000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : A-CF44005

Amount of Each Receipt this Period
 2500

C. Full Name (Last, First, Middle Initial)
American Dental Hygienist's Association PAC

Mailing Address 444 N Michigan Avenue
Suite 3400

City Chicago State IL Zip Code 60611-3980

FEC ID number of contributing federal political committee. **C** C00345868

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44259

Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 173 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
American Express PAC

Mailing Address 801 Pennsylvania Avenue NW
Suite 650

City Washington State DC Zip Code 20004-2673

FEC ID number of contributing federal political committee. **C** C00040535

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44260

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Ash Grove Cement PAC

Mailing Address PO Box 25900

City Shawnee Mission State KS Zip Code 66225-5900

FEC ID number of contributing federal political committee. **C** C00102517

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44261

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Chesapeake Energy Corporation Fed-Pac

Mailing Address PO Box 18496

City Oklahoma City State OK Zip Code 73154-0496

FEC ID number of contributing federal political committee. **C** C00389288

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44262

Amount of Each Receipt this Period
2500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 174 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Express Scripts Inc. Political Fund

Full Name (Last, First, Middle Initial)
Mailing Address 1 Express Way

City Saint Louis State MO Zip Code 63121-1824

FEC ID number of contributing federal political committee. **C** C00365072

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44263

Amount of Each Receipt this Period
 1000

B. National Association of Realtors PAC

Full Name (Last, First, Middle Initial)
Mailing Address 500 New Jersey Avenue NW

City Washington State DC Zip Code 20001-2005

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44268

Amount of Each Receipt this Period
 1000

C. NFIB Safe Trust PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1201 F Street NW Suite 200

City Washington State DC Zip Code 20004-1221

FEC ID number of contributing federal political committee. **C** C00101105

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 4000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44267

Amount of Each Receipt this Period
 1500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

**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 175 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
US Oncology Network PAC

Mailing Address 10101 Woodloch Forest Drive

City State Zip Code
The Woodlands TX 77380-1975

FEC ID number of contributing federal political committee. **C** C00339655

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44264

Amount of Each Receipt this Period
3000

B. Full Name (Last, First, Middle Initial)
Walgreen Co PAC

Mailing Address 104 Wilmot Road # 1459

City State Zip Code
Deerfield IL 60015-5121

FEC ID number of contributing federal political committee. **C** C00160770

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44265

Amount of Each Receipt this Period
1500

C. Full Name (Last, First, Middle Initial)
Weyerhaeuser PAC

Mailing Address 400 N Capitol Street NW Suite 490

City State Zip Code
Washington DC 20001-6509

FEC ID number of contributing federal political committee. **C** C00007948

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : A-CF44266

Amount of Each Receipt this Period
1000

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 176 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Yelp PAC

Mailing Address 140 New Montgomery Street
Floor 9

City San Francisco State CA Zip Code 94105-3705

FEC ID number of contributing federal political committee. **C** C00553966

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2014

Transaction ID : A-CF44061

Amount of Each Receipt this Period
 1000

B. Full Name (Last, First, Middle Initial)
Keeping America Competitive PAC

Mailing Address 4 Old Round Hill Lane

City Greenwich State CT Zip Code 06831-2665

FEC ID number of contributing federal political committee. **C** C00514919

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2014

Transaction ID : A-CF44108

Amount of Each Receipt this Period
 5000

C. Full Name (Last, First, Middle Initial)
Arent Fox LLP PAC

Mailing Address 1050 Connecticut Avenue NW

City Washington State DC Zip Code 20036-5303

FEC ID number of contributing federal political committee. **C** C00241380

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : A-CF44114

Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 177 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
United Technologies PAC

Mailing Address 1101 Pennsylvania Avenue NW
Floor 10

City Washington State DC Zip Code 20004-2566

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : A-CF44115

Amount of Each Receipt this Period
4000

B. Full Name (Last, First, Middle Initial)
American Academy of Dermatology Assn PAC

Mailing Address 1445 New York Avenue NW
Suite 800

City Washington State DC Zip Code 20005-2125

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : A-CF44269

Amount of Each Receipt this Period
1500

C. Full Name (Last, First, Middle Initial)
Amgen PAC

Mailing Address 601 13th Street NW
Floor 12

City Washington State DC Zip Code 20005-3819

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : A-CF44270

Amount of Each Receipt this Period
2500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 178 OF 330
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Anadarko Petroleum PAC

Mailing Address 800 Connecticut Avenue NW
Suite 700

City Washington State DC Zip Code 20006-2717

FEC ID number of contributing federal political committee. **C C00231951**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y
09 / 19 / 2014

Transaction ID : A-CF44271

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Bechtel PAC

Mailing Address 750 9th Street NW
Suite 450

City Washington State DC Zip Code 20001-4577

FEC ID number of contributing federal political committee. **C C00103697**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000

Date of Receipt
M M / D D / Y Y Y Y
09 / 19 / 2014

Transaction ID : A-CF44272

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Bloomin' Brands PAC

Mailing Address 2202 N West Shore Boulevard
Floor 5

City Tampa State FL Zip Code 33607-5747

FEC ID number of contributing federal political committee. **C C00253153**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000

Date of Receipt
M M / D D / Y Y Y Y
09 / 19 / 2014

Transaction ID : A-CF44273

Amount of Each Receipt this Period
2000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 179 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Covidien PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 8th Street NW
 Suite 620
 City Washington State DC Zip Code 20001-4898
 FEC ID number of contributing federal political committee. **C C00433490**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014
Transaction ID : A-CF44274
 Amount of Each Receipt this Period
 1000

B. Deloitte Federal PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 365
 City Washington State DC Zip Code 20044-0365
 FEC ID number of contributing federal political committee. **C C00211318**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 10000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014
Transaction ID : A-CF44275
 Amount of Each Receipt this Period
 3500

C. Gentiva Health Services PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 3350 Riverwood Parkway SE
 Suite 1400
 City Atlanta State GA Zip Code 30339-3314
 FEC ID number of contributing federal political committee. **C C00407080**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 2300

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014
Transaction ID : A-CF44276
 Amount of Each Receipt this Period
 1000

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 180 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. National Apartment Association PAC

Full Name (Last, First, Middle Initial)
National Apartment Association PAC

Mailing Address 4300 Wilson Boulevard
Suite 400

City Arlington State VA Zip Code 22203-4168

FEC ID number of contributing federal political committee. **C** C00113241

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : A-CF44277

Amount of Each Receipt this Period
5000

B. National Lumber & Building Material Dealers Assn PAC

Full Name (Last, First, Middle Initial)
National Lumber & Building Material Dealers Assn PAC

Mailing Address 2025 M Street NW
Suite 800

City Washington State DC Zip Code 20036-2422

FEC ID number of contributing federal political committee. **C** C00039214

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : A-CF44278

Amount of Each Receipt this Period
1000

C. National Ocean Industries Association

Full Name (Last, First, Middle Initial)
National Ocean Industries Association

Mailing Address 1120 G Street NW
Suite 900

City Washington State DC Zip Code 20005-3801

FEC ID number of contributing federal political committee. **C** C00409565

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : A-CF44279

Amount of Each Receipt this Period
2500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 181 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. National Retail Federation PAC

Full Name (Last, First, Middle Initial)
National Retail Federation PAC

Mailing Address 325 7th Street NW
Suite 1000

City Washington State DC Zip Code 20004-2801

FEC ID number of contributing federal political committee. **C** C00040329

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : A-CF44280

Amount of Each Receipt this Period
1000

B. National Telecommunications Cooperative Assn

Full Name (Last, First, Middle Initial)
National Telecommunications Cooperative Assn

Mailing Address 4121 Wilson Boulevard
Floor 10

City Arlington State VA Zip Code 22203-1839

FEC ID number of contributing federal political committee. **C** C00004473

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : A-CF44281

Amount of Each Receipt this Period
2500

C. PGE Bipartisan Committee

Full Name (Last, First, Middle Initial)
PGE Bipartisan Committee

Mailing Address 121 SW Salmon, 1WTC 3

City Portland State OR Zip Code 97204

FEC ID number of contributing federal political committee. **C** C00381020

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : A-CF44282

Amount of Each Receipt this Period
1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 182 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Property Casualty Insurers Association Of America Political Action Committee

Mailing Address 2600 S River Road

City State Zip Code
Des Plaines IL 60018-3203

FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : A-CF44283

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Time Warner Inc. PAC

Mailing Address 800 Connecticut Avenue NW
Suite 1200

City State Zip Code
Washington DC 20006-2709

FEC ID number of contributing federal political committee. **C** C00339291

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : A-CF44284

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Toyota Motor North America PAC

Mailing Address 601 13th Street NW
Suite 910S

City State Zip Code
Washington DC 20005-3800

FEC ID number of contributing federal political committee. **C** C00542365

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : A-CF44285

Amount of Each Receipt this Period
1000

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 183 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Yahoo! Inc. PAC

Mailing Address 101 Constitution Avenue NW
Suite 800W

City Washington State DC Zip Code 20001-2127

FEC ID number of contributing federal political committee. **C C00380535**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : A-CF44286

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
JR Simplot Company PAC

Mailing Address PO Box 27

City Boise State ID Zip Code 83707-0027

FEC ID number of contributing federal political committee. **C C00120873**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : A-CF44292

Amount of Each Receipt this Period
5000

C. Full Name (Last, First, Middle Initial)
Exxon Mobil Corporation PAC

Mailing Address 2000 K Street NW
Suite 710

City Washington State DC Zip Code 20006-1803

FEC ID number of contributing federal political committee. **C C00121368**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014

Transaction ID : A-CF44290

Amount of Each Receipt this Period
2500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 184 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. General Electric Co. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1299 Pennsylvania Avenue NW
 Suite 900W
 City Washington State DC Zip Code 20004-2400
 FEC ID number of contributing federal political committee. **C C00024869**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
6500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014
Transaction ID : A-CF44289
 Amount of Each Receipt this Period
1000

B. General Motors Company PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 Massachusetts Avenue NW
 Suite 400
 City Washington State DC Zip Code 20001-1427
 FEC ID number of contributing federal political committee. **C C00076810**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
4000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014
Transaction ID : A-CF44287
 Amount of Each Receipt this Period
2000

C. The Dow Chemical Company Employees PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 27099
 City Washington State DC Zip Code 20038-7099
 FEC ID number of contributing federal political committee. **C C00074096**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2014
Transaction ID : A-CF44288
 Amount of Each Receipt this Period
2000

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 185 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Safari Club International PAC

Mailing Address 4800 W Gates Pass Road

City Tucson State AZ Zip Code 85745-9600

FEC ID number of contributing federal political committee. **C** C00122101

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : A-CF44293

Amount of Each Receipt this Period
 2000

B. Full Name (Last, First, Middle Initial)
Accenture PAC

Mailing Address 800 Connecticut Avenue NW
Suite 600

City Washington State DC Zip Code 20006-2716

FEC ID number of contributing federal political committee. **C** C00300707

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF44560

Amount of Each Receipt this Period
 2000

C. Full Name (Last, First, Middle Initial)
American College of Cardiology PAC

Mailing Address 2400 N Street NW

City Washington State DC Zip Code 20037-1153

FEC ID number of contributing federal political committee. **C** C00375360

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF44445

Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 186 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
American College of Cardiology PAC

Mailing Address 2400 N Street NW

City Washington State DC Zip Code 20037-1153

FEC ID number of contributing federal political committee. **C** C00375360

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF44446

Amount of Each Receipt this Period
 500

B. Full Name (Last, First, Middle Initial)
American Institute of CPAs PAC

Mailing Address 220 Leigh Farm Road
Palladian 1

City Durham State NC Zip Code 27707-8110

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF44561

Amount of Each Receipt this Period
 2047.64

C. Full Name (Last, First, Middle Initial)
American Institute of CPAs PAC

Mailing Address 220 Leigh Farm Road
Palladian 1

City Durham State NC Zip Code 27707-8110

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF44562

Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3547.64

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 187 OF 330
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Bloomin' Brands PAC

Mailing Address 2202 N West Shore Boulevard
Floor 5

City Tampa State FL Zip Code 33607-5747

FEC ID number of contributing federal political committee. **C** C00253153

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF44563

Amount of Each Receipt this Period
2000

B. Full Name (Last, First, Middle Initial)
Chevron Employees PAC

Mailing Address 1401 Eye Street NW
Suite 1200

City Washington State DC Zip Code 20005-2225

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF44564

Amount of Each Receipt this Period
4000

C. Full Name (Last, First, Middle Initial)
Employees of Northrop Grumman Corporation PAC

Mailing Address 2980 Fairview Park Drive

City Falls Church State VA Zip Code 22042-4511

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF44569

Amount of Each Receipt this Period
1500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7500.00

**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 188 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
General Dynamics PAC

Mailing Address 2941 Fairview Park Drive
Suite 100

City Falls Church State VA Zip Code 22042-4541

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF44565

Amount of Each Receipt this Period
2000

B. Full Name (Last, First, Middle Initial)
IBEW PAC Voluntary Fund

Mailing Address 15937 NE Airport Way

City Portland State OR Zip Code 97230-4958

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF44566

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
Microsoft Corporation PAC

Mailing Address 901 K Street NW
Floor 11

City Washington State DC Zip Code 20001-6441

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF44567

Amount of Each Receipt this Period
2500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 189 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Mortgage Bankers Association PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1717 Rhode Island Avenue NW
 Suite 400
 City Washington State DC Zip Code 20036-3023
 FEC ID number of contributing federal political committee. **C** C00004812
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 5500

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : A-CF44568
 Amount of Each Receipt this Period
 1000

B. National Beer Wholesalers Assn PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 King Street
 Suite 600
 City Alexandria State VA Zip Code 22314-2965
 FEC ID number of contributing federal political committee. **C** C00144766
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 10000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : A-CF44444
 Amount of Each Receipt this Period
 1500

C. Pacific Life Insurance Company PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 Newport Center Drive
 City Newport Beach State CA Zip Code 92660-6307
 FEC ID number of contributing federal political committee. **C** C00068528
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 4000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014
Transaction ID : A-CF44570
 Amount of Each Receipt this Period
 4000

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

6500.00

**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 190 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Pfizer PAC

Mailing Address 1275 Pennsylvania Ave.
Suite 600

City Washington State DC Zip Code 20004-2820

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF44571

Amount of Each Receipt this Period
2500

B. Full Name (Last, First, Middle Initial)
PriceWaterhouseCoopers PAC

Mailing Address 600 13th Street NW
Suite 1000

City Washington State DC Zip Code 20005-3005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF44572

Amount of Each Receipt this Period
1500

C. Full Name (Last, First, Middle Initial)
Republican Main Street PAC

Mailing Address 1220 L Street NW
Suite 100-263

City Washington State DC Zip Code 20005-4018

FEC ID number of contributing federal political committee. **C** C00165159

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF44573

Amount of Each Receipt this Period
1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 191 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Sanofi-Aventis Employees PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1455 Pennsylvania Avenue NW
 Suite 500
 City Washington State DC Zip Code 20004-1033
 FEC ID number of contributing federal political committee. **C** C00144345
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 8000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014
Transaction ID : A-CF44574
 Amount of Each Receipt this Period
 1500

B. Sempra Energy Employees Political Action Committee- Federal
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 Ash Street
 City San Diego State CA Zip Code 92101-3017
 FEC ID number of contributing federal political committee. **C** C00008748
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 2500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014
Transaction ID : A-CF44575
 Amount of Each Receipt this Period
 2500

C. Southern Company Employees PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 Pennsylvania Avenue NW
 Suite 800
 City Washington State DC Zip Code 20004-2601
 FEC ID number of contributing federal political committee. **C** C00144774
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 5500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014
Transaction ID : A-CF44576
 Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 192 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
TE Connectivity, Inc. PAC

Mailing Address 607 14th Street NW
Suite 250

City Washington State DC Zip Code 20005-2072

FEC ID number of contributing federal political committee. **C C00433482**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF44577

Amount of Each Receipt this Period
1500

B. Full Name (Last, First, Middle Initial)
The Williams Companies PAC

Mailing Address 1627 I Street NW
Suite 900

City Washington State DC Zip Code 20006-4057

FEC ID number of contributing federal political committee. **C C00040394**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF44579

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Visa, Inc. PAC

Mailing Address 1300 Connecticut Avenue NW
Suite 900

City Washington State DC Zip Code 20036-1714

FEC ID number of contributing federal political committee. **C C00365122**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF44578

Amount of Each Receipt this Period
2500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 193 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Walden Victory Fund

Mailing Address 228 S Washington Street
Suite 115

City Alexandria State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00542787

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
86437.03

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF45046

Amount of Each Receipt this Period
25000.58

Joint Fundraising Committee

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

B. Full Name (Last, First, Middle Initial)
WPX Energy PAC

Mailing Address 801 Pennsylvania Avenue NW
Suite 315

City Washington State DC Zip Code 20004-2712

FEC ID number of contributing federal political committee. **C** C00502518

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : A-CF44580

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
American Association Of Bioanalysts PAC

Mailing Address 906 Olive Street
Suite 1200

City Saint Louis State MO Zip Code 63101-1448

FEC ID number of contributing federal political committee. **C** C00249581

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-CF44551

Amount of Each Receipt this Period
1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

27000.58

**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 194 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
American Public Power Assn PAC

Mailing Address 1875 Connecticut Avenue NW
Suite 1200

City Washington State DC Zip Code 20009-5715

FEC ID number of contributing federal political committee. **C C00161570**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : A-CF44558

Amount of Each Receipt this Period
750

B. Full Name (Last, First, Middle Initial)
Independent Electrical Contractor's Pride PAC

Mailing Address 4401 Ford Avenue
Suite 1100

City Alexandria State VA Zip Code 22302-1432

FEC ID number of contributing federal political committee. **C C00332031**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : A-CF44550

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Liberty Mutual Insurance PAC

Mailing Address 1620 L Street NW
Suite 100

City Washington State DC Zip Code 20036-5692

FEC ID number of contributing federal political committee. **C C00171843**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : A-CF44559

Amount of Each Receipt this Period
1000

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 195 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Northwest Natural Gas PAC | | Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014 |
| Mailing Address 220 NW 2nd Avenue | | Transaction ID : A-CF44552 |
| City Portland | State OR | |
| Zip Code 97209-3942 | | Amount of Each Receipt this Period 1000 |
| FEC ID number of contributing federal political committee. C C00174367 | | |
| Name of Employer | Occupation | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000 | |

| | | |
|---|---------------------------------|--|
| Full Name (Last, First, Middle Initial) B. AFLAC PAC | | Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014 |
| Mailing Address 1300 Pennsylvania Avenue NW Suite 300 | | Transaction ID : A-CF44746 |
| City Washington | State DC | |
| Zip Code 20004-3039 | | Amount of Each Receipt this Period 3000 |
| FEC ID number of contributing federal political committee. C C00034157 | | |
| Name of Employer | Occupation | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 10000 | |

| | | |
|---|--------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Airlines For America PAC | | Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014 |
| Mailing Address 1301 Pennsylvania Avenue NW Suite 1100 | | Transaction ID : A-CF44747 |
| City Washington | State DC | |
| Zip Code 20004-1738 | | Amount of Each Receipt this Period 1000 |
| FEC ID number of contributing federal political committee. C C00114694 | | |
| Name of Employer | Occupation | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1000 | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 5000.00 |
| TOTAL This Period (last page this line number only)..... | 5000.00 |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 196 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
Alaska Air Group PAC

Mailing Address **PO Box 68900**

City **Seattle** State **WA** Zip Code **98168-0900**

FEC ID number of contributing federal political committee. **C C00024349**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4000**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF44748

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
American Chemistry Council PAC

Mailing Address **700 2nd Street NE**

City **Washington** State **DC** Zip Code **20002-8100**

FEC ID number of contributing federal political committee. **C C00252338**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF44557

Amount of Each Receipt this Period
2500

C. Full Name (Last, First, Middle Initial)
American Petroleum Institute PAC

Mailing Address **1220 L Street NW**

City **Washington** State **DC** Zip Code **20005-4018**

FEC ID number of contributing federal political committee. **C C00483677**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : A-CF44749

Amount of Each Receipt this Period
1000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|-----------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 197 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Commercial Real Estate Development Association PAC

Full Name (Last, First, Middle Initial)
Mailing Address 2201 Cooperative Way
Suite 300

City Herndon State VA Zip Code 20171-4584

FEC ID number of contributing federal political committee. **C** C00233304

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF44753

Amount of Each Receipt this Period
1000

B. DaVita Inc PAC

Full Name (Last, First, Middle Initial)
Mailing Address 900 7th Street NW
Suite 680

City Washington State DC Zip Code 20001-4494

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF44750

Amount of Each Receipt this Period
1000

C. Fluor Corporation PAC

Full Name (Last, First, Middle Initial)
Mailing Address 403 E Capitol Street SE

City Washington State DC Zip Code 20003-3810

FEC ID number of contributing federal political committee. **C** C00034132

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF44751

Amount of Each Receipt this Period
1500

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

**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 198 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|---------------------------------|--|
| Full Name (Last, First, Middle Initial) InsurPac | | Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2014 |
| Mailing Address 412 1st Street SE Suite 300 | | Transaction ID : A-CF44752 |
| City Washington | State DC | |
| FEC ID number of contributing federal political committee. C C00022343 | | Amount of Each Receipt this Period 4500 |
| Name of Employer | Occupation | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 10000 | |

| | | |
|---|--------------------------------|--|
| Full Name (Last, First, Middle Initial) National Association of Mutual Insurance Companies PAC | | Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2014 |
| Mailing Address 122 C Street NW Suite 540 | | Transaction ID : A-CF44754 |
| City Washington | State DC | |
| FEC ID number of contributing federal political committee. C C00170258 | | Amount of Each Receipt this Period 3500 |
| Name of Employer | Occupation | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 3500 | |

| | | |
|---|---------------------------------|--|
| Full Name (Last, First, Middle Initial) National Multi Housing Council PAC | | Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2014 |
| Mailing Address 1850 M Street NW Suite 540 | | Transaction ID : A-CF44755 |
| City Washington | State DC | |
| FEC ID number of contributing federal political committee. C C00130773 | | Amount of Each Receipt this Period 5000 |
| Name of Employer | Occupation | |
| Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 10000 | |

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 13000.00 |
| 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 199 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Office of the Commissioner of Major League Baseball PAC

Full Name (Last, First, Middle Initial)
Office of the Commissioner of Major League Baseball PAC

Mailing Address 1050 Connecticut Avenue NW
Suite 1100

City Washington State DC Zip Code 20036-5318

FEC ID number of contributing federal political committee. **C** C00368142

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF44756

Amount of Each Receipt this Period
5000

B. Petroleum Marketers Association of America

Full Name (Last, First, Middle Initial)
Petroleum Marketers Association of America

Mailing Address 1901 Fort Myer Drive
Suite 1200

City Arlington State VA Zip Code 22209-1606

FEC ID number of contributing federal political committee. **C** C00035204

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF44757

Amount of Each Receipt this Period
5000

C. UBS Americas Inc. PAC

Full Name (Last, First, Middle Initial)
UBS Americas Inc. PAC

Mailing Address 1501 K Street NW
Suite 1100

City Washington State DC Zip Code 20005-1410

FEC ID number of contributing federal political committee. **C** C00012245

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A-CF44758

Amount of Each Receipt this Period
5000

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

15000.00

342602.82

**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 200 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
The Hartford

Mailing Address **PO Box 659519**

City **San Antonio** State **TX** Zip Code **78265-9519**

FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **741**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 09 / 2014

Transaction ID : A-OF43987

Amount of Each Receipt this Period
403
 refund premium overpayment

B. Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

403.00

403.00

**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 201 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" 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)
Walden for Congress

A. Full Name (Last, First, Middle Initial)
AmericanWest Bank

Mailing Address **PO Box 40**

City **Medford** State **OR** Zip Code **97501-0003**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1070.63

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : A-MF45099

Amount of Each Receipt this Period
20.23
 interest

B. Full Name (Last, First, Middle Initial)
Umpqua Bank

Mailing Address **220 E 10th Street**

City **Medford** State **OR** Zip Code **97501-7212**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
314.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : A-MF45097

Amount of Each Receipt this Period
11.9
 interest

C. Full Name (Last, First, Middle Initial)
Wells Fargo Bank

Mailing Address **Hood River In-Store
2249 Cascade Ave**

City **Hood River** State **OR** Zip Code **97031**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
538.45

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : A-MF45098

Amount of Each Receipt this Period
18.5
 interest

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

50.63

**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 202 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" 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)
Walden for Congress

A. Umpqua Bank

Full Name (Last, First, Middle Initial)
Mailing Address 220 E 10th Street

City Medford State OR Zip Code 97501-7212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
314.46

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 29 / 2014

Transaction ID : A-MF45135

Amount of Each Receipt this Period
 11.13
 interest

B. AmericanWest Bank

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 40

City Medford State OR Zip Code 97501-0003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1070.63

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 31 / 2014

Transaction ID : A-MF45137

Amount of Each Receipt this Period
 20.23
 interest

C. Wells Fargo Bank

Full Name (Last, First, Middle Initial)
Mailing Address Hood River In-Store
2249 Cascade Ave

City Hood River State OR Zip Code 97031

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
538.45

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 31 / 2014

Transaction ID : A-MF45139

Amount of Each Receipt this Period
 18.5
 interest

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

49.86

**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 203 OF 330 |
| | <input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. AmericanWest Bank
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 40
 City Medford State OR Zip Code 97501-0003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1070.63

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : A-MF45160
 Amount of Each Receipt this Period
 19.58
 interest

B. Umpqua Bank
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 E 10th Street
 City Medford State OR Zip Code 97501-7212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 314.46

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : A-MF45158
 Amount of Each Receipt this Period
 12.28
 interest

C. Wells Fargo Bank
 Full Name (Last, First, Middle Initial)
 Mailing Address Hood River In-Store
 2249 Cascade Ave
 City Hood River State OR Zip Code 97031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 538.45

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : A-MF45159
 Amount of Each Receipt this Period
 17.9
 interest

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

49.76
 150.25

**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 204 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Bank of America | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address PO Box 37291 | | Amount of Each Disbursement this Period 20 |
| City Baltimore | State MD | Zip Code 21297-3291 |
| Purpose of Disbursement flag | Category/Type 001 | |
| Candidate Name | Transaction ID : B-E-44920 | |
| 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) | Original vendors exceeding reporting threshold itemized as memo transactions. |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Grand Valley Consulting LLC | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address 213 Ashby Street | | Amount of Each Disbursement this Period 9868 |
| City Alexandria | State VA | Zip Code 22305 |
| Purpose of Disbursement fundraising services/travel expense: airfare | Category/Type 001 | |
| Candidate Name | Transaction ID : B-E-44917 | |
| 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) | Original vendors exceeding reporting threshold itemized as memo transactions. |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Delta Airlines | | Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014 |
| Mailing Address PO Box 20706 | | Amount of Each Disbursement this Period 368 |
| City Atlanta | State GA | Zip Code 30320-6001 |
| Purpose of Disbursement travel expense: airfare | Category/Type 001 | |
| Candidate Name | Transaction ID : B-S-7437 | |
| 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) | [MEMO ITEM] Subitemization of Grand Valley Consulting LLC(07/01/14) |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 9888.00 |
| 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 205 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Intuit - QuickBooks | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address 6200 Greenwich Drive | | Amount of Each Disbursement this Period 2831.28 |
| City San Diego | State CA | Zip Code 92122 |
| Purpose of Disbursement taxes | 001 | Transaction ID : B-E-43503 |
| Candidate Name | Category/ Type | Original vendors exceeding reporting threshold itemized as memo transactions. |
| 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. Oregon Department of Revenue | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address PO Box 14800 | | Amount of Each Disbursement this Period 538.57 |
| City Salem | State OR | Zip Code 97310-0001 |
| Purpose of Disbursement taxes | 001 | Transaction ID : B-S-7428 |
| Candidate Name | Category/ Type | [MEMO ITEM] Subitemization of Intuit - QuickBooks(07/01/14) |
| 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. Department of the Treasury - IRS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address Internal Revenue Service Center | | Amount of Each Disbursement this Period 2263.79 |
| City Ogden | State UT | Zip Code 84201-0027 |
| Purpose of Disbursement taxes | 001 | Transaction ID : B-S-7427 |
| Candidate Name | Category/ Type | [MEMO ITEM] Subitemization of Intuit - QuickBooks(07/01/14) |
| 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)..... | 2831.28 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 206 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. DC Department of Employment Services | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address 4058 Minnesota Avenue NE | | Amount of Each Disbursement this Period 28.92 |
| City Washington | State DC | |
| Zip Code 20019-3540 | Purpose of Disbursement taxes | Transaction ID : B-S-7429 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Intuit - QuickBooks(07/01/14) |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Moda Health | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address PO Box 40384 | | Amount of Each Disbursement this Period 422.14 |
| City Portland | State OR | |
| Zip Code 97240-0384 | Purpose of Disbursement insurance premium | Transaction ID : B-E-43327 |
| Candidate Name | 001 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. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 5.75 |
| City San Francisco | State CA | |
| Zip Code 94105-3716 | Purpose of Disbursement credit card processing fee | Transaction ID : B-E-43680 |
| Candidate Name | 001 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)..... | 427.89 |
| 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 207 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Port of Hood River | | Date of Disbursement MM / DD / YYYY 07 / 01 / 2014 |
| Mailing Address 1000 E Port Marina Drive | | Amount of Each Disbursement this Period 654 Transaction ID : B-E-43477 |
| City Hood River | State OR | |
| Zip Code 97031-1172 | Purpose of Disbursement rent | Category/ Type 001 |
| 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. Judy L. Benton | | Date of Disbursement MM / DD / YYYY 07 / 01 / 2014 |
| Mailing Address 1767 12th Street Unit 144 | | Amount of Each Disbursement this Period 1033.02 Transaction ID : B-E-43506 |
| City Hood River | State OR | |
| Zip Code 97031-9531 | Purpose of Disbursement salary | Category/ Type 001 |
| 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. Jon Kunkel | | Date of Disbursement MM / DD / YYYY 07 / 01 / 2014 |
| Mailing Address 61281 Kwinnum Drive | | Amount of Each Disbursement this Period 22.13 Transaction ID : B-E-43505 |
| City Bend | State OR | |
| Zip Code 97702-2772 | Purpose of Disbursement salary | Category/ Type 001 |
| 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)..... | 1709.15 |
| 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 208 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Andrew Malcolm | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address 1724 T Street NW Apt. 21 | | Amount of Each Disbursement this Period 447.33 Transaction ID : B-E-43504 |
| City Washington State DC Zip Code 20009-7112 | Purpose of Disbursement salary Candidate Name Category/Type 001 | |
| 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. Marta A Simons | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address 2870 Prospect Avenue | | Amount of Each Disbursement this Period 4305.24 Transaction ID : B-E-43508 |
| City Hood River State OR Zip Code 97031-1061 | Purpose of Disbursement salary Candidate Name Category/Type 001 | |
| 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. Melissa Stiles | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address 2426 Meadow Creek Drive | | Amount of Each Disbursement this Period 826.64 Transaction ID : B-E-43509 |
| City Medford State OR Zip Code 97504-3629 | Purpose of Disbursement salary Candidate Name Category/Type 001 | |
| 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)..... | 5579.21 |
| 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 209 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Marisa A Wonsyld | | Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014 |
| Mailing Address 1767 12th Street, #126 | | Amount of Each Disbursement this Period 730.39 Transaction ID : B-E-43507 |
| City Hood River | State OR | |
| Zip Code 97031-9531 | Purpose of Disbursement salary | Category/ Type 001 |
| 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. Established Merchant Focus | | Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014 |
| Mailing Address 5940 Venture Drive | | Amount of Each Disbursement this Period 10 Transaction ID : B-E-45121 |
| City Dublin | State OH | |
| Zip Code 43017-2245 | Purpose of Disbursement credit card processing fee | Category/ Type 001 |
| 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. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 0.58 Transaction ID : B-E-43681 |
| City San Francisco | State CA | |
| Zip Code 94105-3716 | Purpose of Disbursement credit card processing fee | Category/ Type 001 |
| 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)..... | 740.97 |
| 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 210 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. American Express | | Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014 |
| Mailing Address PO Box 360001 | | Amount of Each Disbursement this Period 43.65 Transaction ID : B-E-45125 |
| City Ft Lauderdale | State FL | |
| Zip Code 33336-0001 | Purpose of Disbursement credit card processing fee | Category/ Type 001 |
| 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. First Data Global Leasing | | Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014 |
| Mailing Address PO Box 407092 | | Amount of Each Disbursement this Period 36.98 Transaction ID : B-E-45123 |
| City Ft Lauderdale | State FL | |
| Zip Code 33340-7092 | Purpose of Disbursement equipment rent | Category/ Type 001 |
| 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. CenturyLink | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014 |
| Mailing Address PO Box 2961 | | Amount of Each Disbursement this Period 208.33 Transaction ID : B-E-44923 |
| City Phoenix | State AZ | |
| Zip Code 85062-2961 | Purpose of Disbursement phone/internet service | Category/ Type 001 |
| 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)..... | 288.96 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 211 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. CenturyLink | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014 |
| Mailing Address PO Box 1320 | | Amount of Each Disbursement this Period 71.45 |
| City Charlotte | State NC | |
| Zip Code 28201-1320 | Purpose of Disbursement phone service | Transaction ID : B-E-44968 |
| Candidate Name | 001 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. Chase Card Services | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014 |
| Mailing Address PO Box 9001074 | | Amount of Each Disbursement this Period 13604.41 |
| City Louisville | State KY | |
| Zip Code 40290-1074 | Purpose of Disbursement shipping/software/email service/catering/meeting expense/office supplies/travel expense/fundraising | Transaction ID : B-E-45038 |
| Candidate Name | 001 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) | Original vendors exceeding reporting threshold itemized as memo transactions. |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Capitol Hill Club | | Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014 |
| Mailing Address 300 1st Street SE | | Amount of Each Disbursement this Period 90.86 |
| City Washington | State DC | |
| Zip Code 20003-1801 | Purpose of Disbursement meeting expense | Transaction ID : B-S-7512 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 13675.86 |
| 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 212 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Capitol Hill Club | | Date of Disbursement MM / DD / YYYY 06 / 16 / 2014 |
| Mailing Address 300 1st Street SE | | Amount of Each Disbursement this Period 368.74 |
| City Washington | State DC | |
| Zip Code 20003-1801 | Purpose of Disbursement meeting expense | Transaction ID : B-S-7519 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Staples | | Date of Disbursement MM / DD / YYYY 06 / 14 / 2014 |
| Mailing Address 460 Mount Hood Street | | Amount of Each Disbursement this Period 138.45 |
| City The Dalles | State OR | |
| Zip Code 97058-3554 | Purpose of Disbursement office supplies | Transaction ID : B-S-7539 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. FedEx | | Date of Disbursement MM / DD / YYYY 06 / 15 / 2014 |
| Mailing Address PO Box 7221 | | Amount of Each Disbursement this Period 37.39 |
| City Pasadena | State CA | |
| Zip Code 91109-7321 | Purpose of Disbursement shipping | Transaction ID : B-S-7511 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 213 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. FedEx | | Date of Disbursement MM / DD / YYYY 06 / 18 / 2014 |
| Mailing Address PO Box 7221 | | Amount of Each Disbursement this Period 60.42 |
| City Pasadena | State CA | |
| Zip Code 91109-7321 | Purpose of Disbursement shipping | Transaction ID : B-S-7513 |
| Candidate Name | Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Seaside Vacation Homes | | Date of Disbursement MM / DD / YYYY 06 / 10 / 2014 |
| Mailing Address 2675 Sunset Boulevard | | Amount of Each Disbursement this Period 200 |
| City Seaside | State OR | |
| Zip Code 97138-5087 | Purpose of Disbursement event lodging | Transaction ID : B-S-7530 |
| Candidate Name | Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Acqua | | Date of Disbursement MM / DD / YYYY 06 / 10 / 2014 |
| Mailing Address 212 7th Street SE | | Amount of Each Disbursement this Period 2516.58 |
| City Washington | State DC | |
| Zip Code 20003-4311 | Purpose of Disbursement catering | Transaction ID : B-S-7510 |
| Candidate Name | Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 214 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Acqua | | Date of Disbursement MM / DD / YYYY 06 / 18 / 2014 |
| Mailing Address 212 7th Street SE | | Amount of Each Disbursement this Period 650 |
| City Washington State DC Zip Code 20003-4311 | Purpose of Disbursement catering | |
| Candidate Name | Category/Type 001 | Transaction ID : B-S-7514 |
| 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: | | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Trattoria Alberto | | Date of Disbursement MM / DD / YYYY 05 / 29 / 2014 |
| Mailing Address 506 8th Street SE | | Amount of Each Disbursement this Period 2980 |
| City Washington State DC Zip Code 20003-2834 | Purpose of Disbursement catering | |
| Candidate Name | Category/Type 001 | Transaction ID : B-S-7516 |
| 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: | | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. Molly Malone's | | Date of Disbursement MM / DD / YYYY 05 / 29 / 2014 |
| Mailing Address 713 8th Street SE | | Amount of Each Disbursement this Period 207.7 |
| City Washington State DC Zip Code 20003-2802 | Purpose of Disbursement meeting expense | |
| Candidate Name | Category/Type 001 | Transaction ID : B-S-7517 |
| 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: | | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 215 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Dropbox | | Date of Disbursement MM / DD / YYYY 05 / 25 / 2014 |
| Mailing Address 1150 Market Street Suite 1150 | | Amount of Each Disbursement this Period -35.53 |
| City San Francisco | State CA | |
| Zip Code 94102-3804 | Purpose of Disbursement digital storage service credit | Transaction ID : B-S-7540 |
| Candidate Name | Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Rackspace | | Date of Disbursement MM / DD / YYYY 06 / 02 / 2014 |
| Mailing Address 9725 Datapoint Drive Suite 100 | | Amount of Each Disbursement this Period 147 |
| City San Antonio | State TX | |
| Zip Code 78229 | Purpose of Disbursement email service | Transaction ID : B-S-7506 |
| Candidate Name | Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Verve Media Group | | Date of Disbursement MM / DD / YYYY 06 / 11 / 2014 |
| Mailing Address 925 University Avenue Suite V | | Amount of Each Disbursement this Period 19.66 |
| City Sacramento | State CA | |
| Zip Code 95825-6709 | Purpose of Disbursement email service | Transaction ID : B-S-7529 |
| Candidate Name | Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 216 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Verve Media Group | | Date of Disbursement MM / DD / YYYY 05 / 24 / 2014 |
| Mailing Address 925 University Avenue Suite V | | Amount of Each Disbursement this Period 11.1 |
| City Sacramento | State CA Zip Code 95825-6709 | |
| Purpose of Disbursement email service | Category/Type 001 | Transaction ID : B-S-7526 |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Dropbox | | Date of Disbursement MM / DD / YYYY 05 / 24 / 2014 |
| Mailing Address 1150 Market Street Suite 1150 | | Amount of Each Disbursement this Period 1420 |
| City San Francisco | State CA Zip Code 94102-3804 | |
| Purpose of Disbursement digital storage services | Category/Type 001 | Transaction ID : B-S-7525 |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Salamander Resort & Spa | | Date of Disbursement MM / DD / YYYY 06 / 02 / 2014 |
| Mailing Address 500 N Pendleton Street | | Amount of Each Disbursement this Period 533.5 |
| City Middleburg | State VA Zip Code 20117-2683 | |
| Purpose of Disbursement lodging | Category/Type 001 | Transaction ID : B-S-7507 |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 217 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Verve Media Group | | Date of Disbursement MM / DD / YYYY 06 / 06 / 2014 |
| Mailing Address 925 University Avenue Suite V | | Amount of Each Disbursement this Period 18.44 |
| City Sacramento | State CA Zip Code 95825-6709 | |
| Purpose of Disbursement email service | Category/Type 001 | Transaction ID : B-S-7527 |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Verve Media Group | | Date of Disbursement MM / DD / YYYY 06 / 07 / 2014 |
| Mailing Address 925 University Avenue Suite V | | Amount of Each Disbursement this Period 10.94 |
| City Sacramento | State CA Zip Code 95825-6709 | |
| Purpose of Disbursement email service | Category/Type 001 | Transaction ID : B-S-7528 |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. St. Regis Hotel - Deer Valley | | Date of Disbursement MM / DD / YYYY 06 / 06 / 2014 |
| Mailing Address 2300 Deer Valley Drive E | | Amount of Each Disbursement this Period 3500 |
| City Park City | State UT Zip Code 84060 | |
| Purpose of Disbursement catering | Category/Type 001 | Transaction ID : B-S-7508 |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 218 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Staples #2 | | Date of Disbursement MM / DD / YYYY 05 / 20 / 2014 |
| Mailing Address 45 E Stewart Avenue | | Amount of Each Disbursement this Period ----- -99.99 |
| City Medford | State OR | |
| Zip Code 97501-7924 | Purpose of Disbursement office equipment return | Transaction ID : B-S-7531 |
| Candidate Name | Category/ Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Levy Restaurants | | Date of Disbursement MM / DD / YYYY 05 / 28 / 2014 |
| Mailing Address 601 F Street NW | | Amount of Each Disbursement this Period ----- 196.75 |
| City Washington | State DC | |
| Zip Code 20004-1605 | Purpose of Disbursement catering | Transaction ID : B-S-7515 |
| Candidate Name | Category/ Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Staples | | Date of Disbursement MM / DD / YYYY 06 / 07 / 2014 |
| Mailing Address 460 Mount Hood Street | | Amount of Each Disbursement this Period ----- 87.5 |
| City The Dalles | State OR | |
| Zip Code 97058-3554 | Purpose of Disbursement office supplies | Transaction ID : B-S-7538 |
| Candidate Name | Category/ Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(07/08/14) |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | ----- 0.00 |
| TOTAL This Period (last page this line number only)..... | ----- |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 219 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. FTIN Strategies | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2014 |
| Mailing Address 325 E Jimmie Leeds Road Suite 117 | | Amount of Each Disbursement this Period 550 Transaction ID : B-E-44975 |
| City Galloway State NJ Zip Code 08205-4126 | Purpose of Disbursement software fee 001 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. Haley O'Neill LLC | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2014 |
| Mailing Address PO Box 16015 | | Amount of Each Disbursement this Period 7500 Transaction ID : B-E-44919 |
| City Alexandria State VA Zip Code 22302-8015 | Purpose of Disbursement research services 001 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. InfoStructure | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2014 |
| Mailing Address 288 S Pacific Highway | | Amount of Each Disbursement this Period 69.53 Transaction ID : B-E-44924 |
| City Talent State OR Zip Code 97540-6649 | Purpose of Disbursement internet service 001 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: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 8119.53 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 220 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Moore Information | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014 |
| Mailing Address 2130 SW Jefferson Street Suite 200 | | Amount of Each Disbursement this Period 25250 Transaction ID : B-E-44918 |
| City Portland State OR Zip Code 97201-7710 | Purpose of Disbursement survey Candidate Name Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Northwest Graphic Works | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014 |
| Mailing Address 1767 12th Street Suite 221 | | Amount of Each Disbursement this Period 609.5 Transaction ID : B-E-44969 |
| City Hood River State OR Zip Code 97031-9531 | Purpose of Disbursement logo t-shirts Candidate Name Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Pitney Bowes | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014 |
| Mailing Address PO Box 856390 | | Amount of Each Disbursement this Period 90 Transaction ID : B-E-44965 |
| City Louisville State KY Zip Code 40285-6390 | Purpose of Disbursement equipment maintenance fee Candidate Name Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

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|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 25949.50 |
| 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 221 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Pitney Bowes | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014 |
| Mailing Address PO Box 856390 | | Amount of Each Disbursement this Period 385 Transaction ID : B-E-44966 |
| City Louisville | State KY | |
| Zip Code 40285-6390 | Purpose of Disbursement equipment maintenance fee | Category/ Type 001 |
| 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. Pitney Bowes | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014 |
| Mailing Address PO Box 856390 | | Amount of Each Disbursement this Period 274.5 Transaction ID : B-E-44976 |
| City Louisville | State KY | |
| Zip Code 40285-6390 | Purpose of Disbursement rent | Category/ Type 001 |
| 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. Print It | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014 |
| Mailing Address 1802 Cascade Avenue | | Amount of Each Disbursement this Period 4054 Transaction ID : B-E-44922 |
| City Hood River | State OR | |
| Zip Code 97031-3122 | Purpose of Disbursement printing | Category/ Type 001 |
| 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: | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4713.50 |
| 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 222 OF 330 | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | | | | | | | | | | | |
|---|---|--|----------------------------------|---|--|------------------------------------|------------|--|------|----|--|------|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement | | | | | | | | | | |
| A. Push Digital | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>08</td> <td></td> <td>2014</td> </tr> </table> | M M | / | D D | / | Y Y Y Y | 07 | | 08 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | |
| 07 | | 08 | | 2014 | | | | | | | | |
| Mailing Address PO Box 7431 | | Amount of Each Disbursement this Period | | | | | | | | | | |
| <table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Columbia</td> <td>SC</td> <td>29202-7431</td> </tr> </table> | | City | State | Zip Code | Columbia | SC | 29202-7431 | <table border="1"> <tr> <td>2000</td> </tr> </table> | 2000 | | | |
| City | State | Zip Code | | | | | | | | | | |
| Columbia | SC | 29202-7431 | | | | | | | | | | |
| 2000 | | | | | | | | | | | | |
| Purpose of Disbursement digital media services | | Transaction ID : B-E-44930 | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | |
| Office Sought: | | Category/ Type | | | | | | | | | | |
| <table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table> | | | <input type="checkbox"/> House | Disbursement For: 2014 | <input type="checkbox"/> Senate | <input type="checkbox"/> President | | | | | | |
| <input type="checkbox"/> House | Disbursement For: 2014 | | | | | | | | | | | |
| <input type="checkbox"/> Senate | | | | | | | | | | | | |
| <input type="checkbox"/> President | | | | | | | | | | | | |
| State: District: | | <table border="1"> <tr> <td><input type="checkbox"/> Primary</td> <td><input checked="" type="checkbox"/> General</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Other (specify)</td> </tr> </table> | <input type="checkbox"/> Primary | <input checked="" type="checkbox"/> General | <input type="checkbox"/> Other (specify) | | | | | | | |
| <input type="checkbox"/> Primary | <input checked="" type="checkbox"/> General | | | | | | | | | | | |
| <input type="checkbox"/> Other (specify) | | | | | | | | | | | | |

| | | | | | | | | | | | | |
|---|---|--|----------------------------------|---|--|------------------------------------|------------|--|--------|----|--|------|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement | | | | | | | | | | |
| B. Push Digital | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>08</td> <td></td> <td>2014</td> </tr> </table> | M M | / | D D | / | Y Y Y Y | 07 | | 08 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | |
| 07 | | 08 | | 2014 | | | | | | | | |
| Mailing Address PO Box 7431 | | Amount of Each Disbursement this Period | | | | | | | | | | |
| <table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Columbia</td> <td>SC</td> <td>29202-7431</td> </tr> </table> | | City | State | Zip Code | Columbia | SC | 29202-7431 | <table border="1"> <tr> <td>380.24</td> </tr> </table> | 380.24 | | | |
| City | State | Zip Code | | | | | | | | | | |
| Columbia | SC | 29202-7431 | | | | | | | | | | |
| 380.24 | | | | | | | | | | | | |
| Purpose of Disbursement digital media services | | Transaction ID : B-E-44931 | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | |
| Office Sought: | | Category/ Type | | | | | | | | | | |
| <table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table> | | | <input type="checkbox"/> House | Disbursement For: 2014 | <input type="checkbox"/> Senate | <input type="checkbox"/> President | | | | | | |
| <input type="checkbox"/> House | Disbursement For: 2014 | | | | | | | | | | | |
| <input type="checkbox"/> Senate | | | | | | | | | | | | |
| <input type="checkbox"/> President | | | | | | | | | | | | |
| State: District: | | <table border="1"> <tr> <td><input type="checkbox"/> Primary</td> <td><input checked="" type="checkbox"/> General</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Other (specify)</td> </tr> </table> | <input type="checkbox"/> Primary | <input checked="" type="checkbox"/> General | <input type="checkbox"/> Other (specify) | | | | | | | |
| <input type="checkbox"/> Primary | <input checked="" type="checkbox"/> General | | | | | | | | | | | |
| <input type="checkbox"/> Other (specify) | | | | | | | | | | | | |

| | | | | | | | | | | | | |
|---|---|--|----------------------------------|---|--|------------------------------------|------------|--|------|----|--|------|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement | | | | | | | | | | |
| C. Push Digital | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>08</td> <td></td> <td>2014</td> </tr> </table> | M M | / | D D | / | Y Y Y Y | 07 | | 08 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | |
| 07 | | 08 | | 2014 | | | | | | | | |
| Mailing Address PO Box 7431 | | Amount of Each Disbursement this Period | | | | | | | | | | |
| <table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Columbia</td> <td>SC</td> <td>29202-7431</td> </tr> </table> | | City | State | Zip Code | Columbia | SC | 29202-7431 | <table border="1"> <tr> <td>2500</td> </tr> </table> | 2500 | | | |
| City | State | Zip Code | | | | | | | | | | |
| Columbia | SC | 29202-7431 | | | | | | | | | | |
| 2500 | | | | | | | | | | | | |
| Purpose of Disbursement online advertising | | Transaction ID : B-E-44964 | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | |
| Office Sought: | | Category/ Type | | | | | | | | | | |
| <table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For: 2014</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table> | | | <input type="checkbox"/> House | Disbursement For: 2014 | <input type="checkbox"/> Senate | <input type="checkbox"/> President | | | | | | |
| <input type="checkbox"/> House | Disbursement For: 2014 | | | | | | | | | | | |
| <input type="checkbox"/> Senate | | | | | | | | | | | | |
| <input type="checkbox"/> President | | | | | | | | | | | | |
| State: District: | | <table border="1"> <tr> <td><input type="checkbox"/> Primary</td> <td><input checked="" type="checkbox"/> General</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Other (specify)</td> </tr> </table> | <input type="checkbox"/> Primary | <input checked="" type="checkbox"/> General | <input type="checkbox"/> Other (specify) | | | | | | | |
| <input type="checkbox"/> Primary | <input checked="" type="checkbox"/> General | | | | | | | | | | | |
| <input type="checkbox"/> Other (specify) | | | | | | | | | | | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 4880.24 |
| 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 223 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Something Else Strategies LLC | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2014 |
| Mailing Address 112 Lantern Ridge Drive | | Amount of Each Disbursement this Period 4980 Transaction ID : B-E-44977 |
| City Easley | State SC | |
| Zip Code 29642-8289 | Purpose of Disbursement media production | Category/ Type 001 |
| 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. The Conference Group | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2014 |
| Mailing Address 254 Chapman Road | | Amount of Each Disbursement this Period 93.98 Transaction ID : B-E-44925 |
| City Newark | State DE | |
| Zip Code 19702-5413 | Purpose of Disbursement phone service | Category/ Type 001 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) c. The Hartford | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2014 |
| Mailing Address PO Box 659519 | | Amount of Each Disbursement this Period 1548 Transaction ID : B-E-43722 |
| City San Antonio | State TX | |
| Zip Code 78265-9519 | Purpose of Disbursement insurance premium | Category/ Type 001 |
| 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: | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 6621.98 |
| 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 224 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | | | |
|--|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. The University Club of Portland | | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014 | |
| Mailing Address 1225 SW 6th Avenue | | | Amount of Each Disbursement this Period 77 | |
| City Portland | State OR | Zip Code 97204-1001 | Transaction ID : B-E-44921 | |
| Purpose of Disbursement facility use fee | | 001 | 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. US Postal Service | | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014 | |
| Mailing Address 408 Cascade Avenue | | | Amount of Each Disbursement this Period 92 | |
| City Hood River | State OR | Zip Code 97031-7031 | Transaction ID : B-E-44933 | |
| Purpose of Disbursement rent | | 001 | 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. Verizon Wireless | | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014 | |
| Mailing Address PO Box 660108 | | | Amount of Each Disbursement this Period 634.99 | |
| City Dallas | State TX | Zip Code 75266 | Transaction ID : B-E-44928 | |
| Purpose of Disbursement phone service | | 001 | 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: | | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 803.99 |
| 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 225 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Verizon Wireless | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014 |
| Mailing Address PO Box 660108 | | Amount of Each Disbursement this Period 50.08 |
| City Dallas | State TX | |
| Zip Code 75266 | Purpose of Disbursement internet service | Transaction ID : B-E-44967 |
| Candidate Name | 001 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. Verizon Wireless | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014 |
| Mailing Address PO Box 660108 | | Amount of Each Disbursement this Period 46.08 |
| City Dallas | State TX | |
| Zip Code 75266 | Purpose of Disbursement internet service | Transaction ID : B-E-44974 |
| Candidate Name | 001 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. VISA Cardmember Service | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 411.2 |
| City Saint Louis | State MO | |
| Zip Code 63179-0408 | Purpose of Disbursement software support/shipping | Transaction ID : B-E-44971 |
| Candidate Name | 001 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) | Original vendors exceeding reporting threshold itemized as memo transactions. |
| State: District: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 507.36 |
| 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 226 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. UPS | | Date of Disbursement MM / DD / YYYY 05 / 25 / 2014 |
| Mailing Address 55 Glenlake Parkway NE | | Amount of Each Disbursement this Period 144.77 |
| City Atlanta | State GA Zip Code 30328 | |
| Purpose of Disbursement shipping | Category/Type 001 | Transaction ID : B-S-7475 |
| Candidate Name | | |
| Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> | Disbursement For: 2014 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> | [MEMO ITEM] Subitemization of VISA Cardmember Service(07/08/14) |
| State: District: | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. UPS | | Date of Disbursement MM / DD / YYYY 06 / 01 / 2014 |
| Mailing Address 55 Glenlake Parkway NE | | Amount of Each Disbursement this Period 16.43 |
| City Atlanta | State GA Zip Code 30328 | |
| Purpose of Disbursement shipping | Category/Type 001 | Transaction ID : B-S-7476 |
| Candidate Name | | |
| Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> | Disbursement For: 2014 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> | [MEMO ITEM] Subitemization of VISA Cardmember Service(07/08/14) |
| State: District: | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) c. Aristotle/Complete Campaigns | | Date of Disbursement MM / DD / YYYY 06 / 01 / 2014 |
| Mailing Address 205 Pennsylvania Avenue SE | | Amount of Each Disbursement this Period 250 |
| City Washington | State DC Zip Code 20003-1164 | |
| Purpose of Disbursement software support | Category/Type 001 | Transaction ID : B-S-7477 |
| Candidate Name | | |
| Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> | Disbursement For: 2014 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> | [MEMO ITEM] Subitemization of VISA Cardmember Service(07/08/14) |
| State: District: | | |

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|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 227 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. VISA Cardmember Service | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2014 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 35 |
| City Saint Louis | State MO | Zip Code 63179-0408 |
| Purpose of Disbursement internet service | Category/ Type 001 | |
| Candidate Name | | Transaction ID : B-E-44972 |
| 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: | Original vendors exceeding reporting threshold itemized as memo transactions. | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Verizon Wireless | | Date of Disbursement MM / DD / YYYY 05 / 25 / 2014 |
| Mailing Address PO Box 660108 | | Amount of Each Disbursement this Period 35 |
| City Dallas | State TX | Zip Code 75266 |
| Purpose of Disbursement internet service | Category/ Type 001 | |
| Candidate Name | | Transaction ID : B-S-7478 |
| 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: | [MEMO ITEM] Subitemization of VISA Cardmember Service(07/08/14) | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. VISA Cardmember Service | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2014 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 247.8 |
| City Saint Louis | State MO | Zip Code 63179-0408 |
| Purpose of Disbursement travel expense/internet service/fundraiser expense | Category/ Type 001 | |
| Candidate Name | | Transaction ID : B-E-44973 |
| 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: | Original vendors exceeding reporting threshold itemized as memo transactions. | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 282.80 |
| 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 228 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. DC Parking | | Date of Disbursement MM / DD / YYYY 05 / 28 / 2014 |
| Mailing Address 949 Constitution Ave | | Amount of Each Disbursement this Period 4.45 |
| City Washington | State DC Zip Code 20003 | |
| Purpose of Disbursement travel expense | Category/Type 001 | Transaction ID : B-S-7480 [MEMO ITEM] Subitemization of VISA Cardmember Service(07/08/14) |
| 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. Dunham Cellars | | Date of Disbursement MM / DD / YYYY 06 / 02 / 2014 |
| Mailing Address 150 E Boeing Avenue | | Amount of Each Disbursement this Period 188.5 |
| City Walla Walla | State WA Zip Code 99362-7400 | |
| Purpose of Disbursement fundraising expense | Category/Type 001 | Transaction ID : B-S-7481 [MEMO ITEM] Subitemization of VISA Cardmember Service(07/08/14) |
| 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. DC Parking | | Date of Disbursement MM / DD / YYYY 06 / 10 / 2014 |
| Mailing Address 949 Constitution Ave | | Amount of Each Disbursement this Period 2.7 |
| City Washington | State DC Zip Code 20003 | |
| Purpose of Disbursement travel expense | Category/Type 001 | Transaction ID : B-S-7482 [MEMO ITEM] Subitemization of VISA Cardmember Service(07/08/14) |
| 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)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 229 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. DC Parking | | Date of Disbursement MM / DD / YYYY 06 / 11 / 2014 |
| Mailing Address 949 Constitution Ave | | Amount of Each Disbursement this Period 3.45 |
| City Washington | State DC Zip Code 20003 | |
| Purpose of Disbursement travel expense | Category/Type 001 | Transaction ID : B-S-7483 [MEMO ITEM] Subitemization of VISA Cardmember Service(07/08/14) |
| 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. DC Parking | | Date of Disbursement MM / DD / YYYY 06 / 11 / 2014 |
| Mailing Address 949 Constitution Ave | | Amount of Each Disbursement this Period 1.3 |
| City Washington | State DC Zip Code 20003 | |
| Purpose of Disbursement travel expense | Category/Type 001 | Transaction ID : B-S-7484 [MEMO ITEM] Subitemization of VISA Cardmember Service(07/08/14) |
| 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. GoGo Air | | Date of Disbursement MM / DD / YYYY 05 / 26 / 2014 |
| Mailing Address 1250 N Arlington Heights Road Suite 500 | | Amount of Each Disbursement this Period 44.95 |
| City Itasca | State IL Zip Code 60143-1216 | |
| Purpose of Disbursement internet services | Category/Type 001 | Transaction ID : B-S-7479 [MEMO ITEM] Subitemization of VISA Cardmember Service(07/08/14) |
| 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: | | |

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|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 230 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. DC Parking | | Date of Disbursement MM / DD / YYYY 06 / 11 / 2014 |
| Mailing Address 949 Constitution Ave | | Amount of Each Disbursement this Period 2.45 |
| City Washington | State DC | |
| Zip Code 20003 | Purpose of Disbursement travel expense | Transaction ID : B-S-7485 |
| Candidate Name | Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of VISA Cardmember Service(07/08/14) |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Raymond S. Baum | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2014 |
| Mailing Address 5963 Grand Pavilion Way Unit 315 | | Amount of Each Disbursement this Period 50 |
| City Alexandria | State VA | |
| Zip Code 22303-2281 | Purpose of Disbursement travel expense: mileage | Transaction ID : B-E-44970 |
| Candidate Name | Category/Type 001 | |
| 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. Barbara Hosford | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2014 |
| Mailing Address 2218 Prospect Avenue | | Amount of Each Disbursement this Period 207.49 |
| City Hood River | State OR | |
| Zip Code 97031-1254 | Purpose of Disbursement volunteer meeting expense | Transaction ID : B-E-44932 |
| Candidate Name | Category/Type 001 | |
| 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) | Original vendors exceeding reporting threshold itemized as memo transactions. |
| State: District: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 257.49 |
| 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 231 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Costco | | Date of Disbursement MM / DD / YYYY 07 / 03 / 2014 |
| Mailing Address 19610 SE 1st Street | | Amount of Each Disbursement this Period 207.49 |
| City Camas State WA Zip Code 98607 | Purpose of Disbursement volunteer meeting expense | |
| Candidate Name | Category/Type 001 | Transaction ID : B-S-7442 |
| 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: | | [MEMO ITEM] Subitemization of Barbara Hosford(07/08/14) |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Jon Kunkel | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2014 |
| Mailing Address 61281 Kwinnum Drive | | Amount of Each Disbursement this Period 387.09 |
| City Bend State OR Zip Code 97702-2772 | Purpose of Disbursement travel expense: mileage, lodging | |
| Candidate Name | Category/Type 001 | Transaction ID : B-E-44926 |
| 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: | | Original vendors exceeding reporting threshold itemized as memo transactions. |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. Hood River Inn | | Date of Disbursement MM / DD / YYYY 07 / 04 / 2014 |
| Mailing Address 1108 E Marina Way | | Amount of Each Disbursement this Period 234.09 |
| City Hood River State OR Zip Code 97031-2378 | Purpose of Disbursement travel expense: lodging | |
| Candidate Name | Category/Type 001 | Transaction ID : B-S-7439 |
| 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: | | [MEMO ITEM] Subitemization of Jon Kunkel(07/08/14) |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 387.09 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 232 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Marta A Simons | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014 |
| Mailing Address 2870 Prospect Avenue | | Amount of Each Disbursement this Period 76.39 Transaction ID : B-E-44927 |
| City Hood River | State OR | |
| Zip Code 97031-1061 | Purpose of Disbursement parade expense | Original vendors exceeding reporting threshold itemized as memo transactions. |
| Candidate Name | 001 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. Gregory P Walden | | Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014 |
| Mailing Address 1504 Sherman Avenue | | Amount of Each Disbursement this Period 109 Transaction ID : B-E-44929 |
| City Hood River | State OR | |
| Zip Code 97031-1456 | Purpose of Disbursement travel expense: mileage | Original vendors exceeding reporting threshold itemized as memo transactions. |
| Candidate Name | 001 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. American Institute of CPAs PAC | | Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014 |
| Mailing Address 220 Leigh Farm Road Palladian 1 | | Amount of Each Disbursement this Period 452.36 Transaction ID : B-I-45185 |
| City Durham | State NC | |
| Zip Code 27707-8110 | Purpose of Disbursement Inkind: fundraiser room rental, catering | Original vendors exceeding reporting threshold itemized as memo transactions. |
| 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: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 637.75 |
| 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 233 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Transfirst | | Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014 |
| Mailing Address 12202 Airport Way Suite 100 | | Amount of Each Disbursement this Period 849.62 Transaction ID : B-E-45127 |
| City Broomfield | State CO Zip Code 80021 | |
| Purpose of Disbursement credit card processing fee | Category/Type 001 | |
| 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. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 1.15 Transaction ID : B-E-43682 |
| City San Francisco | State CA Zip Code 94105-3716 | |
| Purpose of Disbursement credit card processing fee | Category/Type 001 | |
| 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. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 5.75 Transaction ID : B-E-43683 |
| City San Francisco | State CA Zip Code 94105-3716 | |
| Purpose of Disbursement credit card processing fee | Category/Type 001 | |
| 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: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 856.52 |
| 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 234 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 1.44 Transaction ID : B-E-43684 |
| City San Francisco | State CA | |
| Zip Code 94105-3716 | Purpose of Disbursement credit card processing fee | Category/ Type 001 |
| 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. Wall Street Storage | | Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014 |
| Mailing Address 1315 NW Wall Street | | Amount of Each Disbursement this Period 105 Transaction ID : B-E-44951 |
| City Bend | State OR | |
| Zip Code 97701 | Purpose of Disbursement rent | Category/ Type 001 |
| 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. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 5.75 Transaction ID : B-E-43685 |
| City San Francisco | State CA | |
| Zip Code 94105-3716 | Purpose of Disbursement credit card processing fee | Category/ Type 001 |
| 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)..... | 112.19 |
| 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 235 OF 330 | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. William L. Smith | | Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014 |
| Mailing Address 2334 NW Tower Rock Road | | Amount of Each Disbursement this Period 590 Transaction ID : B-I-45183 |
| City Bend | State OR Zip Code 97701-1020 | |
| Purpose of Disbursement Inkind: catering for fundraising event | | 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. Oran Teater | | Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014 |
| Mailing Address 1837 NW Duniway Court | | Amount of Each Disbursement this Period 635.18 Transaction ID : B-I-45184 |
| City Bend | State OR Zip Code 97701-5606 | |
| Purpose of Disbursement Inkind: fundraising event: food & drink | | 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. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 28.75 Transaction ID : B-E-43686 |
| City San Francisco | State CA Zip Code 94105-3716 | |
| Purpose of Disbursement credit card processing fee | | Category/ Type 001 |
| 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: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1253.93 |
| 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 236 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Jay N. Cranford | | Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014 |
| Mailing Address 4136 N Richmond Street | | Amount of Each Disbursement this Period 250 Transaction ID : B-I-45186 |
| City Arlington | State VA | |
| Zip Code 22207-4816 | Purpose of Disbursement Inkind: fundraising services | 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. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 60.38 Transaction ID : B-E-43687 |
| City San Francisco | State CA | |
| Zip Code 94105-3716 | Purpose of Disbursement credit card processing fee | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) c. Intuit - QuickBooks | | Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014 |
| Mailing Address 6200 Greenwich Drive | | Amount of Each Disbursement this Period 108 Transaction ID : B-E-44990 |
| City San Diego | State CA | |
| Zip Code 92122 | Purpose of Disbursement service 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: | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 418.38 |
| 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 237 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Art of Catering | | Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014 |
| Mailing Address 1019 NW Everett Street | | Amount of Each Disbursement this Period 5384 Transaction ID : B-E-44950 |
| City Portland | State OR | |
| Zip Code 97209-3117 | Purpose of Disbursement catering | Category/ Type 001 |
| 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. CenturyLink | | Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014 |
| Mailing Address PO Box 1320 | | Amount of Each Disbursement this Period 67.62 Transaction ID : B-E-44952 |
| City Charlotte | State NC | |
| Zip Code 28201-1320 | Purpose of Disbursement phone service | Category/ Type 001 |
| 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. Columbia Bank | | Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014 |
| Mailing Address PO Box 980 | | Amount of Each Disbursement this Period 55.95 Transaction ID : B-E-45129 |
| City Hood River | State OR | |
| Zip Code 97031-0032 | Purpose of Disbursement bank fee | Category/ Type 001 |
| 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)..... | 5507.97 |
| 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 238 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | | | | | | | | | | | | |
|--|---|--|---|---------|---|-----|---|---------|----|--|----|--|------|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement | | | | | | | | | | | |
| A. FTIN Strategies | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>31</td> <td></td> <td>2014</td> </tr> </table> | | M M | / | D D | / | Y Y Y Y | 07 | | 31 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | |
| 07 | | 31 | | 2014 | | | | | | | | | |
| Mailing Address 325 E Jimmie Leeds Road Suite 117 | | Amount of Each Disbursement this Period | | | | | | | | | | | |
| City Galloway State NJ Zip Code 08205-4126 | | <table border="1"> <tr> <td>550</td> </tr> </table> | | 550 | | | | | | | | | |
| 550 | | | | | | | | | | | | | |
| Purpose of Disbursement software fee | | Transaction ID : B-E-44957 | | | | | | | | | | | |
| Candidate Name | | Category/Type | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | 001 | | | | | | | | | | | |
| Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | |

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|--|---|--|---|---------|---|-----|---|---------|----|--|----|--|------|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement | | | | | | | | | | | |
| B. Holland Studios | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>31</td> <td></td> <td>2014</td> </tr> </table> | | M M | / | D D | / | Y Y Y Y | 07 | | 31 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | |
| 07 | | 31 | | 2014 | | | | | | | | | |
| Mailing Address 2181 NW Front Avenue Suite F | | Amount of Each Disbursement this Period | | | | | | | | | | | |
| City Portland State OR Zip Code 97209-1833 | | <table border="1"> <tr> <td>568</td> </tr> </table> | | 568 | | | | | | | | | |
| 568 | | | | | | | | | | | | | |
| Purpose of Disbursement photography services | | Transaction ID : B-E-44960 | | | | | | | | | | | |
| Candidate Name | | Category/Type | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | 001 | | | | | | | | | | | |
| Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | |

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|--|---|--|---|---------|---|-----|---|---------|----|--|----|--|------|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement | | | | | | | | | | | |
| C. K&L Gates PAC | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>31</td> <td></td> <td>2014</td> </tr> </table> | | M M | / | D D | / | Y Y Y Y | 07 | | 31 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | |
| 07 | | 31 | | 2014 | | | | | | | | | |
| Mailing Address 1601 K Street NW | | Amount of Each Disbursement this Period | | | | | | | | | | | |
| City Washington State DC Zip Code 20006-1682 | | <table border="1"> <tr> <td>195</td> </tr> </table> | | 195 | | | | | | | | | |
| 195 | | | | | | | | | | | | | |
| Purpose of Disbursement fundraiser site rent | | Transaction ID : B-E-44953 | | | | | | | | | | | |
| Candidate Name | | Category/Type | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | 001 | | | | | | | | | | | |
| 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)..... | 1313.00 |
| 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 239 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 25.61 Transaction ID : B-E-43688 |
| City San Francisco | State CA Zip Code 94105-3716 | |
| Purpose of Disbursement credit card processing fee | Category/Type 001 | |
| 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. Premiere Valet Services LLC | | Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014 |
| Mailing Address 6700 SW 105th Avenue Suite 104 | | Amount of Each Disbursement this Period 949.06 Transaction ID : B-E-44956 |
| City Beaverton | State OR Zip Code 97008-8831 | |
| Purpose of Disbursement fundraising expense | Category/Type 001 | |
| 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. Providence Hood River Hospital Foundation | | Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014 |
| Mailing Address PO Box 149 | | Amount of Each Disbursement this Period 75 Transaction ID : B-E-44955 |
| City Hood River | State OR Zip Code 97031-0055 | |
| Purpose of Disbursement event ticket | Category/Type 001 | |
| 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)..... | 1049.67 |
| 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 240 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a | <input type="checkbox"/> 18 <input type="checkbox"/> 20b | <input type="checkbox"/> 19a <input type="checkbox"/> 20c | <input type="checkbox"/> 19b <input type="checkbox"/> 21 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | | | | | | | | | | | |
|--|--|--|-------|----------|----------|----|------------|--|--------|----|--|------|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement | | | | | | | | | | |
| A. Push Digital | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>31</td> <td></td> <td>2014</td> </tr> </table> | M M | / | D D | / | Y Y Y Y | 07 | | 31 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | |
| 07 | | 31 | | 2014 | | | | | | | | |
| Mailing Address PO Box 7431 | | Amount of Each Disbursement this Period | | | | | | | | | | |
| <table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Columbia</td> <td>SC</td> <td>29202-7431</td> </tr> </table> | | City | State | Zip Code | Columbia | SC | 29202-7431 | <table border="1"> <tr> <td>153.09</td> </tr> </table> | 153.09 | | | |
| City | State | Zip Code | | | | | | | | | | |
| Columbia | SC | 29202-7431 | | | | | | | | | | |
| 153.09 | | | | | | | | | | | | |
| Purpose of Disbursement digital media services | | <table border="1"> <tr> <td>001</td> </tr> </table> Transaction ID : B-E-44954 | 001 | | | | | | | | | |
| 001 | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | |
| Office Sought: | Disbursement For: 2014 | | | | | | | | | | | |
| <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | |

| | | | | | | | | | | | | |
|--|--|--|-------|----------|------------|----|------------|---|---------|----|--|------|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement | | | | | | | | | | |
| B. Chase Card Services | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>01</td> <td></td> <td>2014</td> </tr> </table> | M M | / | D D | / | Y Y Y Y | 08 | | 01 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | |
| 08 | | 01 | | 2014 | | | | | | | | |
| Mailing Address PO Box 9001074 | | Amount of Each Disbursement this Period | | | | | | | | | | |
| <table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Louisville</td> <td>KY</td> <td>40290-1074</td> </tr> </table> | | City | State | Zip Code | Louisville | KY | 40290-1074 | <table border="1"> <tr> <td>8371.37</td> </tr> </table> | 8371.37 | | | |
| City | State | Zip Code | | | | | | | | | | |
| Louisville | KY | 40290-1074 | | | | | | | | | | |
| 8371.37 | | | | | | | | | | | | |
| Purpose of Disbursement travel expense/shipping/office supplies/catering/office equipment/internet services/annual fee/loan | | <table border="1"> <tr> <td>001</td> </tr> </table> Transaction ID : B-E-45067 | 001 | | | | | | | | | |
| 001 | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | |
| Office Sought: | Disbursement For: 2014 | | | | | | | | | | | |
| <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | |

Original vendors exceeding reporting threshold itemized as memo transactions.

| | | | | | | | | | | | | |
|--|--|--|-------|----------|----------|----|------------|---|-------|----|--|------|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement | | | | | | | | | | |
| C. FedEx | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>14</td> <td></td> <td>2014</td> </tr> </table> | M M | / | D D | / | Y Y Y Y | 07 | | 14 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | |
| 07 | | 14 | | 2014 | | | | | | | | |
| Mailing Address PO Box 7221 | | Amount of Each Disbursement this Period | | | | | | | | | | |
| <table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Pasadena</td> <td>CA</td> <td>91109-7321</td> </tr> </table> | | City | State | Zip Code | Pasadena | CA | 91109-7321 | <table border="1"> <tr> <td>34.77</td> </tr> </table> | 34.77 | | | |
| City | State | Zip Code | | | | | | | | | | |
| Pasadena | CA | 91109-7321 | | | | | | | | | | |
| 34.77 | | | | | | | | | | | | |
| Purpose of Disbursement shipping | | <table border="1"> <tr> <td>001</td> </tr> </table> Transaction ID : B-S-7556 | 001 | | | | | | | | | |
| 001 | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | |
| Office Sought: | Disbursement For: 2014 | | | | | | | | | | | |
| <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | |

[MEMO ITEM]
Subitemization of Chase Card Services(08/01/14)

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 8524.46 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 241 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. FedEx | | Date of Disbursement MM / DD / YYYY 06 / 25 / 2014 |
| Mailing Address PO Box 7221 | | Amount of Each Disbursement this Period 40.35 |
| City Pasadena | State CA | |
| Zip Code 91109-7321 | Purpose of Disbursement shipping | Transaction ID : B-S-7549 |
| Candidate Name | Category/ Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. United Airlines | | Date of Disbursement MM / DD / YYYY 07 / 25 / 2014 |
| Mailing Address 233 S Wacker Drive | | Amount of Each Disbursement this Period 14.99 |
| City Chicago | State IL | |
| Zip Code 60606-7147 | Purpose of Disbursement travel expense | Transaction ID : B-S-7597 |
| Candidate Name | Category/ Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Capitol Hill Club | | Date of Disbursement MM / DD / YYYY 07 / 16 / 2014 |
| Mailing Address 300 1st Street SE | | Amount of Each Disbursement this Period 628.5 |
| City Washington | State DC | |
| Zip Code 20003-1801 | Purpose of Disbursement meeting expense | Transaction ID : B-S-7558 |
| Candidate Name | Category/ Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

| | |
|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 242 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | | |
|---|--|--------------------------|---|
| Full Name (Last, First, Middle Initial) A. Johnny's Half Shell | | | Date of Disbursement MM / DD / YYYY 06 / 27 / 2014 |
| Mailing Address 400 N Capitol Street NW Suite 175 | | | Amount of Each Disbursement this Period 000,000.00 Transaction ID : B-S-7561 |
| City Washington | State DC | Zip Code 20001-1511 | |
| Purpose of Disbursement fundraising expense | | Category/ Type 001 | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| 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. Hertz - Bend | | | Date of Disbursement MM / DD / YYYY 07 / 03 / 2014 |
| Mailing Address 535 NE Savannah Drive | | | Amount of Each Disbursement this Period 000,000.00 Transaction ID : B-S-7574 |
| City Bend | State OR | Zip Code 97701-4864 | |
| Purpose of Disbursement travel expense | | Category/ Type 001 | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| 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. Fresh Connections Catering | | | Date of Disbursement MM / DD / YYYY 06 / 25 / 2014 |
| Mailing Address 1114 Herndon Parkway | | | Amount of Each Disbursement this Period 000,000.00 Transaction ID : B-S-7548 |
| City Herndon | State VA | Zip Code 20170-5577 | |
| Purpose of Disbursement catering | | Category/ Type 001 | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| 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)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 243 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. China Gorge Restaurant | | Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014 |
| Mailing Address 2680 Old Columbia River Drive | | Amount of Each Disbursement this Period 14.5 |
| City Hood River | State OR | |
| Zip Code 97031-9523 | Purpose of Disbursement meeting expense | Transaction ID : B-S-7588 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Silipint | | Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014 |
| Mailing Address 1405 SW Commerce Avenue Suite 130 | | Amount of Each Disbursement this Period 3921.53 |
| City Bend | State OR | |
| Zip Code 97701-7243 | Purpose of Disbursement fundraising expense | Transaction ID : B-S-7589 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

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|---|--|--|
| Full Name (Last, First, Middle Initial) c. The Box Maker | | Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014 |
| Mailing Address PO Box 58968 | | Amount of Each Disbursement this Period 913.23 |
| City Tukwila | State WA | |
| Zip Code 98138-1968 | Purpose of Disbursement fundraising expense | Transaction ID : B-S-7593 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 244 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. DC Parking | | Date of Disbursement MM / DD / YYYY 07 / 24 / 2014 |
| Mailing Address 949 Constitution Ave | | Amount of Each Disbursement this Period 5.72 |
| City Washington | State DC Zip Code 20003 | |
| Purpose of Disbursement travel expense | Category/Type 001 | Transaction ID : B-S-7598 [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| 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. DC Parking | | Date of Disbursement MM / DD / YYYY 07 / 16 / 2014 |
| Mailing Address 949 Constitution Ave | | Amount of Each Disbursement this Period 6.33 |
| City Washington | State DC Zip Code 20003 | |
| Purpose of Disbursement travel expense | Category/Type 001 | Transaction ID : B-S-7569 [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| 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: | | |

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|---|--|---|
| Full Name (Last, First, Middle Initial) c. US Post Office | | Date of Disbursement MM / DD / YYYY 06 / 23 / 2014 |
| Mailing Address 325 S Riverside Avenue | | Amount of Each Disbursement this Period 17.45 |
| City Medford | State OR Zip Code 97501-0862 | |
| Purpose of Disbursement postage | Category/Type 001 | Transaction ID : B-S-7575 [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| 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: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 245 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. American Hole 'n One | | Date of Disbursement MM / DD / YYYY 07 / 11 / 2014 |
| Mailing Address 55 Scott Street | | Amount of Each Disbursement this Period 880 |
| City Buford | State GA | |
| Zip Code 30518-3056 | Purpose of Disbursement fundraising expense | Transaction ID : B-S-7567 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Portland City Grill | | Date of Disbursement MM / DD / YYYY 06 / 30 / 2014 |
| Mailing Address 111 SW 5th Avenue | | Amount of Each Disbursement this Period 597.25 |
| City Portland | State OR | |
| Zip Code 97204-3604 | Purpose of Disbursement meeting expense | Transaction ID : B-S-7570 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Simply Mac | | Date of Disbursement MM / DD / YYYY 07 / 24 / 2014 |
| Mailing Address 425 SW Powerhouse Drive Suite 307 | | Amount of Each Disbursement this Period 1378.99 |
| City Bend | State OR | |
| Zip Code 97702-1299 | Purpose of Disbursement computer/software/case | Transaction ID : B-S-7600 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 246 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Staples | | Date of Disbursement MM / DD / YYYY 07 / 16 / 2014 |
| Mailing Address 460 Mount Hood Street | | Amount of Each Disbursement this Period 273.67 |
| City The Dalles | State OR | |
| Zip Code 97058-3554 | Purpose of Disbursement office supplies | Transaction ID : B-S-7587 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Capitol Hill Club | | Date of Disbursement MM / DD / YYYY 07 / 16 / 2014 |
| Mailing Address 300 1st Street SE | | Amount of Each Disbursement this Period 67.5 |
| City Washington | State DC | |
| Zip Code 20003-1801 | Purpose of Disbursement meeting expense | Transaction ID : B-S-7568 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Pine Tavern | | Date of Disbursement MM / DD / YYYY 07 / 24 / 2014 |
| Mailing Address 967 NW Brooks Street | | Amount of Each Disbursement this Period 13.75 |
| City Bend | State OR | |
| Zip Code 97701-2051 | Purpose of Disbursement meeting expense | Transaction ID : B-S-7599 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 247 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Ruth's Chris Steak House | | Date of Disbursement MM / DD / YYYY 07 / 16 / 2014 |
| Mailing Address 724 9th Street NW | | Amount of Each Disbursement this Period 2741.58 |
| City Washington | State DC | |
| Zip Code 20001-4505 | Purpose of Disbursement catering | Transaction ID : B-S-7557 |
| Candidate Name | Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. GoDaddy.com | | Date of Disbursement MM / DD / YYYY 07 / 20 / 2014 |
| Mailing Address 14455 N Hayden Road Suite 219 | | Amount of Each Disbursement this Period 14.99 |
| City Scottsdale | State AZ | |
| Zip Code 85260 | Purpose of Disbursement web hosting services | Transaction ID : B-S-7560 |
| Candidate Name | Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. GoDaddy.com | | Date of Disbursement MM / DD / YYYY 06 / 20 / 2014 |
| Mailing Address 14455 N Hayden Road Suite 219 | | Amount of Each Disbursement this Period 14.99 |
| City Scottsdale | State AZ | |
| Zip Code 85260 | Purpose of Disbursement web hosting services | Transaction ID : B-S-7545 |
| Candidate Name | Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 248 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Carmine's Restaurant | | Date of Disbursement MM / DD / YYYY 06 / 27 / 2014 |
| Mailing Address 200 W 44th Street | | Amount of Each Disbursement this Period -8467.14 |
| City New York | State NY | |
| Zip Code 10036 | Purpose of Disbursement credit for overcharge error | Transaction ID : B-S-7544 |
| Candidate Name | Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

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|---|--|--|
| Full Name (Last, First, Middle Initial) B. UPS Store #5043 | | Date of Disbursement MM / DD / YYYY 06 / 26 / 2014 |
| Mailing Address 1767 12th Street | | Amount of Each Disbursement this Period 6.8 |
| City Hood River | State OR | |
| Zip Code 97031-9531 | Purpose of Disbursement postage | Transaction ID : B-S-7583 |
| Candidate Name | Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Sonoma Restaurant | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2014 |
| Mailing Address 223 Pennsylvania Avenue SE | | Amount of Each Disbursement this Period 778.05 |
| City Washington | State DC | |
| Zip Code 20003-1107 | Purpose of Disbursement catering | Transaction ID : B-S-7555 |
| Candidate Name | Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 249 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Sonoma Restaurant | | Date of Disbursement MM / DD / YYYY 07 / 23 / 2014 |
| Mailing Address 223 Pennsylvania Avenue SE | | Amount of Each Disbursement this Period 1795.5 |
| City Washington State DC Zip Code 20003-1107 | Purpose of Disbursement catering 001 Category/Type | |
| Candidate Name | | Transaction ID : B-S-7603 [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| 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: | | |

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|--|--|---|
| Full Name (Last, First, Middle Initial) B. Association of American Railroads PAC | | Date of Disbursement MM / DD / YYYY 06 / 24 / 2014 |
| Mailing Address 425 3rd Street SW Suite 1000 | | Amount of Each Disbursement this Period 150 |
| City Washington State DC Zip Code 20024-3228 | Purpose of Disbursement fundraiser rental fee 001 Category/Type | |
| Candidate Name | | Transaction ID : B-S-7547 [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| 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: | | |

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|--|--|---|
| Full Name (Last, First, Middle Initial) c. VIP Catering | | Date of Disbursement MM / DD / YYYY 07 / 16 / 2014 |
| Mailing Address 1601 K Street NW | | Amount of Each Disbursement this Period 295.52 |
| City Washington State DC Zip Code 20006 | Purpose of Disbursement catering 001 Category/Type | |
| Candidate Name | | Transaction ID : B-S-7559 [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| 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: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|--|---|--|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 250 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a | <input type="checkbox"/> 18 <input type="checkbox"/> 20b | <input type="checkbox"/> 19a <input type="checkbox"/> 20c | <input type="checkbox"/> 19b <input type="checkbox"/> 21 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Verve Media Group | | Date of Disbursement MM / DD / YYYY 07 / 03 / 2014 |
| Mailing Address 925 University Avenue Suite V | | Amount of Each Disbursement this Period 14 |
| City Sacramento | State CA | |
| Zip Code 95825-6709 | Purpose of Disbursement email service | Transaction ID : B-S-7576 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

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|---|--|---|
| Full Name (Last, First, Middle Initial) B. Verve Media Group | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2014 |
| Mailing Address 925 University Avenue Suite V | | Amount of Each Disbursement this Period 10.74 |
| City Sacramento | State CA | |
| Zip Code 95825-6709 | Purpose of Disbursement email service | Transaction ID : B-S-7578 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

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|---|--|---|
| Full Name (Last, First, Middle Initial) c. Verve Media Group | | Date of Disbursement MM / DD / YYYY 07 / 16 / 2014 |
| Mailing Address 925 University Avenue Suite V | | Amount of Each Disbursement this Period 11.44 |
| City Sacramento | State CA | |
| Zip Code 95825-6709 | Purpose of Disbursement email service | Transaction ID : B-S-7580 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 251 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Verve Media Group | | Date of Disbursement MM / DD / YYYY 07 / 24 / 2014 |
| Mailing Address 925 University Avenue Suite V | | Amount of Each Disbursement this Period 11.54 |
| City Sacramento State CA Zip Code 95825-6709 | Purpose of Disbursement email service Candidate Name Category/Type 001 | |
| 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) | Transaction ID : B-S-7601 [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

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|--|--|---|
| Full Name (Last, First, Middle Initial) B. Verve Media Group | | Date of Disbursement MM / DD / YYYY 07 / 24 / 2014 |
| Mailing Address 925 University Avenue Suite V | | Amount of Each Disbursement this Period 11.26 |
| City Sacramento State CA Zip Code 95825-6709 | Purpose of Disbursement email service Candidate Name Category/Type 001 | |
| 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) | Transaction ID : B-S-7602 [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

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|--|--|---|
| Full Name (Last, First, Middle Initial) c. Verve Media Group | | Date of Disbursement MM / DD / YYYY 07 / 26 / 2014 |
| Mailing Address 925 University Avenue Suite V | | Amount of Each Disbursement this Period 15.82 |
| City Sacramento State CA Zip Code 95825-6709 | Purpose of Disbursement email service Candidate Name Category/Type 001 | |
| 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) | Transaction ID : B-S-7596 [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

| | |
|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 252 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Verve Media Group | | Date of Disbursement MM / DD / YYYY 07 / 30 / 2014 |
| Mailing Address 925 University Avenue Suite V | | Amount of Each Disbursement this Period 15.06 |
| City Sacramento | State CA | |
| Zip Code 95825-6709 | Purpose of Disbursement email service | Transaction ID : B-S-7592 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Rackspace | | Date of Disbursement MM / DD / YYYY 08 / 01 / 2014 |
| Mailing Address 9725 Datapoint Drive Suite 100 | | Amount of Each Disbursement this Period 147 |
| City San Antonio | State TX | |
| Zip Code 78229 | Purpose of Disbursement email service | Transaction ID : B-S-7591 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Rackspace | | Date of Disbursement MM / DD / YYYY 07 / 02 / 2014 |
| Mailing Address 9725 Datapoint Drive Suite 100 | | Amount of Each Disbursement this Period 147 |
| City San Antonio | State TX | |
| Zip Code 78229 | Purpose of Disbursement email service | Transaction ID : B-S-7551 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/01/14) |
| State: District: | | |

| | |
|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 253 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | | | |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Grand Valley Consulting LLC | | | Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014 | |
| Mailing Address 213 Ashby Street | | | Amount of Each Disbursement this Period 9500 | |
| City Alexandria | State VA | Zip Code 22305 | Transaction ID : B-E-44959 | |
| Purpose of Disbursement fundraising services | | Category/ Type 001 | | |
| 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. Intuit - QuickBooks | | | Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014 | |
| Mailing Address 6200 Greenwich Drive | | | Amount of Each Disbursement this Period 3801.08 | |
| City San Diego | State CA | Zip Code 92122 | Transaction ID : B-E-44991 | |
| Purpose of Disbursement taxes | | Category/ Type 001 | | |
| 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) | | Original vendors exceeding reporting threshold itemized as memo transactions. | |
| State: District: | | | | |

| | | | | |
|---|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial) c. Oregon Department of Revenue | | | Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014 | |
| Mailing Address PO Box 14800 | | | Amount of Each Disbursement this Period 780.97 | |
| City Salem | State OR | Zip Code 97310-0001 | Transaction ID : B-S-7490 | |
| Purpose of Disbursement taxes | | Category/ Type 001 | [MEMO ITEM] Subitemization of Intuit - QuickBooks(08/01/14) | |
| 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: | | | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 13301.08 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 254 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Department of the Treasury - IRS | | Date of Disbursement MM / DD / YYYY 08 / 01 / 2014 |
| Mailing Address Internal Revenue Service Center | | Amount of Each Disbursement this Period 9999.99 2991.19 |
| City Ogden State UT Zip Code 84201-0027 | Purpose of Disbursement taxes Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Intuit - QuickBooks(08/01/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. DC Department of Employment Services | | Date of Disbursement MM / DD / YYYY 08 / 01 / 2014 |
| Mailing Address 4058 Minnesota Avenue NE | | Amount of Each Disbursement this Period 9999.99 28.92 |
| City Washington State DC Zip Code 20019-3540 | Purpose of Disbursement taxes Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Intuit - QuickBooks(08/01/14) |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Moda Health | | Date of Disbursement MM / DD / YYYY 08 / 01 / 2014 |
| Mailing Address PO Box 40384 | | Amount of Each Disbursement this Period 9999.99 908.67 |
| City Portland State OR Zip Code 97240-0384 | Purpose of Disbursement insurance premium Category/Type 001 | |
| 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) | Transaction ID : B-E-43726 |
| State: District: | | |

| | |
|---|--------------------------|
| SUBTOTAL of Disbursements This Page (optional)..... | 9999.99 908.67 |
| TOTAL This Period (last page this line number only)..... | 9999.99 |

**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 255 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 32.2 Transaction ID : B-E-44047 |
| City San Francisco | State CA | |
| Zip Code 94105-3716 | Purpose of Disbursement credit card processing fee | Category/ Type 001 |
| 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. Port of Hood River | | Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014 |
| Mailing Address 1000 E Port Marina Drive | | Amount of Each Disbursement this Period 654 Transaction ID : B-E-44958 |
| City Hood River | State OR | |
| Zip Code 97031-1172 | Purpose of Disbursement rent | Category/ Type 001 |
| 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. Judy L. Benton | | Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014 |
| Mailing Address 1767 12th Street Unit 144 | | Amount of Each Disbursement this Period 1037.93 Transaction ID : B-E-44994 |
| City Hood River | State OR | |
| Zip Code 97031-9531 | Purpose of Disbursement salary | Category/ Type 001 |
| 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: | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1724.13 |
| 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 256 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Jon Kunkel | | Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014 |
| Mailing Address 61281 Kwinnum Drive | | Amount of Each Disbursement this Period 2053.8 Transaction ID : B-E-44993 |
| City Bend State OR Zip Code 97702-2772 | Purpose of Disbursement salary Category/Type 001 | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Amount of Each Disbursement this Period 447.33 Transaction ID : B-E-44992 |
| 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. Andrew Malcolm | | Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014 |
| Mailing Address 1724 T Street NW Apt. 21 | | Amount of Each Disbursement this Period 447.33 Transaction ID : B-E-44992 |
| City Washington State DC Zip Code 20009-7112 | Purpose of Disbursement salary Category/Type 001 | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Amount of Each Disbursement this Period 4305.11 Transaction ID : B-E-44997 |
| 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. Marta A Simons | | Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014 |
| Mailing Address 2870 Prospect Avenue | | Amount of Each Disbursement this Period 4305.11 Transaction ID : B-E-44997 |
| City Hood River State OR Zip Code 97031-1061 | Purpose of Disbursement salary Category/Type 001 | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Amount of Each Disbursement this Period 6806.24 |
| 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)..... | 6806.24 |
| 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 257 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Melissa Stiles | | Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014 |
| Mailing Address 2426 Meadow Creek Drive | | Amount of Each Disbursement this Period 826.6 Transaction ID : B-E-44998 |
| City Medford | State OR | |
| Zip Code 97504-3629 | Purpose of Disbursement salary | Category/ Type 001 |
| 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. Marisa A Wonsyld | | Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014 |
| Mailing Address 1767 12th Street, #126 | | Amount of Each Disbursement this Period 730.36 Transaction ID : B-E-44995 |
| City Hood River | State OR | |
| Zip Code 97031-9531 | Purpose of Disbursement salary | Category/ Type 001 |
| 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. Established Merchant Focus | | Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014 |
| Mailing Address 5940 Venture Drive | | Amount of Each Disbursement this Period 10 Transaction ID : B-E-45153 |
| City Dublin | State OH | |
| Zip Code 43017-2245 | Purpose of Disbursement credit card processing fee | Category/ Type 001 |
| 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) | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1566.96 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 258 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Piryx | | Date of Disbursement MM / DD / YYYY 08 / 04 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 28.75 Transaction ID : B-E-44048 |
| City San Francisco | State CA Zip Code 94105-3716 | |
| Purpose of Disbursement credit card processing fee | Category/Type 001 | |
| 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. Square | | Date of Disbursement MM / DD / YYYY 08 / 04 / 2014 |
| Mailing Address 901 Mission Street | | Amount of Each Disbursement this Period 249.58 Transaction ID : B-E-43761 |
| City San Francisco | State CA Zip Code 94103-2905 | |
| Purpose of Disbursement credit card processing fee | Category/Type 001 | |
| 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. Nate Chapman | | Date of Disbursement MM / DD / YYYY 08 / 04 / 2014 |
| Mailing Address 2725 NW Rainbow Ridge Drive | | Amount of Each Disbursement this Period 488 Transaction ID : B-E-43796 |
| City Bend | State OR Zip Code 97701-8722 | |
| Purpose of Disbursement fundraising event: golf tourney cash prize | Category/Type 001 | |
| 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)..... | 766.33 |
| 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 259 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Jubal Frost | | Date of Disbursement MM / DD / YYYY 08 / 04 / 2014 |
| Mailing Address 8950 Royer Road S | | Amount of Each Disbursement this Period 488 Transaction ID : B-E-43797 |
| City Salem | State OR | |
| Zip Code 97306-9447 | Purpose of Disbursement fundraising event: golf tourney cash prize | Category/ Type 001 |
| 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. Camille Hukari | | Date of Disbursement MM / DD / YYYY 08 / 04 / 2014 |
| Mailing Address 1938 Osprey Drive | | Amount of Each Disbursement this Period 460 Transaction ID : B-I-45182 |
| City Redmond | State OR | |
| Zip Code 97756-9225 | Purpose of Disbursement Inkind: fundraising event prizes: wine baskets | 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. Dennis D. Oliphant | | Date of Disbursement MM / DD / YYYY 08 / 04 / 2014 |
| Mailing Address 88 NW Drake Road | | Amount of Each Disbursement this Period 488 Transaction ID : B-E-43795 |
| City Bend | State OR | |
| Zip Code 97701-2346 | Purpose of Disbursement fundraising event: golf tourney cash prize | Category/ Type 001 |
| 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) | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1436.00 |
| 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 260 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. American Express | | Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014 |
| Mailing Address PO Box 360001 | | Amount of Each Disbursement this Period 58.1 Transaction ID : B-E-45155 |
| City Ft Lauderdale | State FL | |
| Zip Code 33336-0001 | Purpose of Disbursement credit card processing fee | Category/ Type 001 |
| 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. Bank of America | | Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014 |
| Mailing Address PO Box 37291 | | Amount of Each Disbursement this Period 20 Transaction ID : B-E-45066 |
| City Baltimore | State MD | |
| Zip Code 21297-3291 | Purpose of Disbursement flag | Category/ Type 001 |
| 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: | Original vendors exceeding reporting threshold itemized as memo transactions. |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) c. First Data Global Leasing | | Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014 |
| Mailing Address PO Box 407092 | | Amount of Each Disbursement this Period 36.98 Transaction ID : B-E-45154 |
| City Ft Lauderdale | State FL | |
| Zip Code 33340-7092 | Purpose of Disbursement equipment rent | Category/ Type 001 |
| 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)..... | 115.08 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 261 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 5.75 Transaction ID : B-E-44049 |
| City San Francisco | State CA Zip Code 94105-3716 | |
| Purpose of Disbursement credit card processing fee | Category/Type 001 | |
| 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. CenturyLink | | Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014 |
| Mailing Address PO Box 2961 | | Amount of Each Disbursement this Period 212.1 Transaction ID : B-E-44940 |
| City Phoenix | State AZ Zip Code 85062-2961 | |
| Purpose of Disbursement phone service | Category/Type 001 | |
| 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. Grand Valley Consulting LLC | | Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014 |
| Mailing Address 213 Ashby Street | | Amount of Each Disbursement this Period 874.14 Transaction ID : B-E-44872 |
| City Alexandria | State VA Zip Code 22305 | |
| Purpose of Disbursement shipping/travel expense | Category/Type 001 | |
| 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: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1091.99 |
| 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 262 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Alaska Airlines | | Date of Disbursement MM / DD / YYYY 08 / 03 / 2014 |
| Mailing Address Portland International Airport 7000 NE Airport Way | | Amount of Each Disbursement this Period 827.86 |
| City Portland | State OR | |
| Zip Code 97218 | Purpose of Disbursement airfare | Transaction ID : B-S-7433 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Grand Valley Consulting LLC(08/08/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. FedEx | | Date of Disbursement MM / DD / YYYY 07 / 01 / 2014 |
| Mailing Address PO Box 7221 | | Amount of Each Disbursement this Period 34.28 |
| City Pasadena | State CA | |
| Zip Code 91109-7321 | Purpose of Disbursement shipping | Transaction ID : B-S-7432 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Grand Valley Consulting LLC(08/08/14) |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. InfoStructure | | Date of Disbursement MM / DD / YYYY 08 / 08 / 2014 |
| Mailing Address 288 S Pacific Highway | | Amount of Each Disbursement this Period 69.53 |
| City Talent | State OR | |
| Zip Code 97540-6649 | Purpose of Disbursement internet service | Transaction ID : B-E-44944 |
| Candidate Name | 001 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: | | |

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|---|-------|
| SUBTOTAL of Disbursements This Page (optional)..... | 69.53 |
| 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 263 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. Print It

Full Name (Last, First, Middle Initial)
Mailing Address 1802 Cascade Avenue

City Hood River State OR Zip Code 97031-3122

Purpose of Disbursement printing

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 08 / 08 / 2014

Amount of Each Disbursement this Period 244.31

Transaction ID : B-E-44942

Category/Type 001

B. Push Digital

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 7431

City Columbia State SC Zip Code 29202-7431

Purpose of Disbursement online advertising

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 08 / 08 / 2014

Amount of Each Disbursement this Period 2500

Transaction ID : B-E-44936

Category/Type 001

c. Push Digital

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 7431

City Columbia State SC Zip Code 29202-7431

Purpose of Disbursement digital media services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 08 / 08 / 2014

Amount of Each Disbursement this Period 2000

Transaction ID : B-E-44937

Category/Type 001

SUBTOTAL of Disbursements This Page (optional)..... 4744.31

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 264 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Push Digital | | Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014 |
| Mailing Address PO Box 7431 | | Amount of Each Disbursement this Period 190.72 Transaction ID : B-E-44938 |
| City Columbia | State SC | |
| Zip Code 29202-7431 | Purpose of Disbursement digital media services | Category/ Type 001 |
| 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. Sisters Rodeo | | Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014 |
| Mailing Address PO Box 1018 | | Amount of Each Disbursement this Period 250 Transaction ID : B-E-45167 |
| City Sisters | State OR | |
| Zip Code 97759-1018 | Purpose of Disbursement print advertising | Category/ Type 001 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) c. The Conference Group | | Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014 |
| Mailing Address 254 Chapman Road | | Amount of Each Disbursement this Period 197.07 Transaction ID : B-E-44943 |
| City Newark | State DE | |
| Zip Code 19702-5413 | Purpose of Disbursement phone service | Category/ Type 001 |
| 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: | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 637.79 |
| 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 265 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | | |
|---|--|--------------------------|--|
| Full Name (Last, First, Middle Initial) A. The University Club of Portland | | | Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014 |
| Mailing Address 1225 SW 6th Avenue | | | Amount of Each Disbursement this Period 77 Transaction ID : B-E-44945 |
| City Portland | State OR | Zip Code 97204-1001 | |
| Purpose of Disbursement facility use fee | | Category/ Type 001 | |
| 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. Verizon Wireless | | | Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014 |
| Mailing Address PO Box 660108 | | | Amount of Each Disbursement this Period 50.08 Transaction ID : B-E-44939 |
| City Dallas | State TX | Zip Code 75266 | |
| Purpose of Disbursement internet services | | Category/ Type 001 | |
| 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. Verizon Wireless | | | Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014 |
| Mailing Address PO Box 660108 | | | Amount of Each Disbursement this Period 612.85 Transaction ID : B-E-44941 |
| City Dallas | State TX | Zip Code 75266 | |
| Purpose of Disbursement phone service | | Category/ Type 001 | |
| 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: | | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 739.93 |
| 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 266 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | | | |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. VISA Cardmember Service | | | Date of Disbursement MM / DD / YYYY 08 / 08 / 2014 | |
| Mailing Address PO Box 790408 | | | Amount of Each Disbursement this Period 61.25 | |
| City Saint Louis | State MO | Zip Code 63179-0408 | Transaction ID : B-E-44947 | |
| Purpose of Disbursement travel expense/internet service | | Category/ Type 001 | | |
| Candidate Name | | | Original vendors exceeding reporting threshold itemized as memo transactions. | |
| 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. DC Parking | | | Date of Disbursement MM / DD / YYYY 06 / 18 / 2014 | |
| Mailing Address 949 Constitution Ave | | | Amount of Each Disbursement this Period 2.95 | |
| City Washington | State DC | Zip Code 20003 | Transaction ID : B-S-7447 | |
| Purpose of Disbursement travel expense | | Category/ Type 001 | | |
| Candidate Name | | | [MEMO ITEM] Subitemization of VISA Cardmember Service(08/08/14) | |
| 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. DC Parking | | | Date of Disbursement MM / DD / YYYY 06 / 23 / 2014 | |
| Mailing Address 949 Constitution Ave | | | Amount of Each Disbursement this Period 4.45 | |
| City Washington | State DC | Zip Code 20003 | Transaction ID : B-S-7448 | |
| Purpose of Disbursement travel expense | | Category/ Type 001 | | |
| Candidate Name | | | [MEMO ITEM] Subitemization of VISA Cardmember Service(08/08/14) | |
| 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: | | | |

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|---|-------|
| SUBTOTAL of Disbursements This Page (optional)..... | 61.25 |
| 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 267 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. DC Parking | | Date of Disbursement MM / DD / YYYY 06 / 25 / 2014 |
| Mailing Address 949 Constitution Ave | | Amount of Each Disbursement this Period 2.45 |
| City Washington | State DC | |
| Zip Code 20003 | Purpose of Disbursement travel expense | Transaction ID : B-S-7450 |
| Candidate Name | Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of VISA Cardmember Service(08/08/14) |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. DC Parking | | Date of Disbursement MM / DD / YYYY 06 / 25 / 2014 |
| Mailing Address 949 Constitution Ave | | Amount of Each Disbursement this Period 3.8 |
| City Washington | State DC | |
| Zip Code 20003 | Purpose of Disbursement travel expense | Transaction ID : B-S-7451 |
| Candidate Name | Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of VISA Cardmember Service(08/08/14) |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. DC Parking | | Date of Disbursement MM / DD / YYYY 07 / 09 / 2014 |
| Mailing Address 949 Constitution Ave | | Amount of Each Disbursement this Period 2.65 |
| City Washington | State DC | |
| Zip Code 20003 | Purpose of Disbursement travel expense | Transaction ID : B-S-7452 |
| Candidate Name | Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of VISA Cardmember Service(08/08/14) |
| State: District: | | |

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|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 268 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

Full Name (Last, First, Middle Initial)
A. GoGo Air

Mailing Address 1250 N Arlington Heights Road
Suite 500

City Itasca State IL Zip Code 60143-1216

Purpose of Disbursement internet service

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 06 / 26 / 2014

Amount of Each Disbursement this Period 44.95

Transaction ID : B-S-7449

[MEMO ITEM]
Subitemization of VISA Cardmember Service(08/08/14)

Full Name (Last, First, Middle Initial)
B. VISA Cardmember Service

Mailing Address PO Box 790408

City Saint Louis State MO Zip Code 63179-0408

Purpose of Disbursement software support/shipping

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 08 / 08 / 2014

Amount of Each Disbursement this Period 776.3

Transaction ID : B-E-44948

Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial)
C. UPS

Mailing Address 55 Glenlake Parkway NE

City Atlanta State GA Zip Code 30328

Purpose of Disbursement shipping

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 06 / 15 / 2014

Amount of Each Disbursement this Period 254.59

Transaction ID : B-S-7453

[MEMO ITEM]
Subitemization of VISA Cardmember Service(08/08/14)

SUBTOTAL of Disbursements This Page (optional)..... 776.30

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 269 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. UPS | | Date of Disbursement MM / DD / YYYY 06 / 29 / 2014 |
| Mailing Address 55 Glenlake Parkway NE | | Amount of Each Disbursement this Period 120.76 |
| City Atlanta State GA Zip Code 30328 | Purpose of Disbursement shipping | |
| Candidate Name | Category/Type 001 | Transaction ID : B-S-7454 |
| 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: | | |

[MEMO ITEM]
Subitemization of VISA Cardmember Service(08/08/14)

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. UPS | | Date of Disbursement MM / DD / YYYY 07 / 14 / 2014 |
| Mailing Address 55 Glenlake Parkway NE | | Amount of Each Disbursement this Period 150.95 |
| City Atlanta State GA Zip Code 30328 | Purpose of Disbursement shipping | |
| Candidate Name | Category/Type 001 | Transaction ID : B-S-7456 |
| 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: | | |

[MEMO ITEM]
Subitemization of VISA Cardmember Service(08/08/14)

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. Aristotle/Complete Campaigns | | Date of Disbursement MM / DD / YYYY 07 / 01 / 2014 |
| Mailing Address 205 Pennsylvania Avenue SE | | Amount of Each Disbursement this Period 250 |
| City Washington State DC Zip Code 20003-1164 | Purpose of Disbursement software support | |
| Candidate Name | Category/Type 001 | Transaction ID : B-S-7455 |
| 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: | | |

[MEMO ITEM]
Subitemization of VISA Cardmember Service(08/08/14)

| | |
|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 270 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. VISA Cardmember Service | | Date of Disbursement MM / DD / YYYY 08 / 08 / 2014 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 35 |
| City Saint Louis | State MO | Zip Code 63179-0408 |
| Purpose of Disbursement internet service | Category/ Type 001 | |
| Candidate Name | Transaction ID : B-E-44949 | |
| 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) | Original vendors exceeding reporting threshold itemized as memo transactions. |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Verizon Wireless | | Date of Disbursement MM / DD / YYYY 06 / 25 / 2014 |
| Mailing Address PO Box 660108 | | Amount of Each Disbursement this Period 35 |
| City Dallas | State TX | Zip Code 75266 |
| Purpose of Disbursement internet service | Category/ Type 001 | |
| Candidate Name | Transaction ID : B-S-7457 | |
| 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) | [MEMO ITEM] Subitemization of VISA Cardmember Service(08/08/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Jon Kunkel | | Date of Disbursement MM / DD / YYYY 08 / 08 / 2014 |
| Mailing Address 61281 Kwinnum Drive | | Amount of Each Disbursement this Period 225.76 |
| City Bend | State OR | Zip Code 97702-2772 |
| Purpose of Disbursement travel expense: mileage/event tickets/fundraising supplies | Category/ Type 001 | |
| Candidate Name | Transaction ID : B-E-44946 | |
| 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) | Original vendors exceeding reporting threshold itemized as memo transactions. |
| State: District: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 260.76 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 272 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Chase Card Services | | Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014 |
| Mailing Address PO Box 9001074 | | Amount of Each Disbursement this Period 20915.4 Transaction ID : B-E-45068 |
| City Louisville State KY Zip Code 40290-1074 | Purpose of Disbursement meeting expense/travel expense/shipping/postage/fundraising expense/email service/office supplies 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) | Original vendors exceeding reporting threshold itemized as memo transactions. |
| State: District: | Category/Type 001 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. FedEx | | Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2014 |
| Mailing Address PO Box 7221 | | Amount of Each Disbursement this Period 170.44 Transaction ID : B-S-7606 |
| City Pasadena State CA Zip Code 91109-7321 | Purpose of Disbursement shipping 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/12/14) |
| State: District: | Category/Type 001 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Johnny's Half Shell | | Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014 |
| Mailing Address 400 N Capitol Street NW Suite 175 | | Amount of Each Disbursement this Period 1100 Transaction ID : B-S-7631 |
| City Washington State DC Zip Code 20001-1511 | Purpose of Disbursement catering 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/12/14) |
| State: District: | Category/Type 001 | |

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|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 20915.40 |
| 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 273 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Worthy Brewing | | Date of Disbursement MM / DD / YYYY 08 / 06 / 2014 |
| Mailing Address 495 NE Bellevue Drive | | Amount of Each Disbursement this Period 235.5 |
| City Bend | State OR Zip Code 97701-7412 | |
| Purpose of Disbursement travel expense | Category/Type 001 | Transaction ID : B-S-7612 |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/12/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. US Postal Service | | Date of Disbursement MM / DD / YYYY 08 / 08 / 2014 |
| Mailing Address 408 Cascade Avenue | | Amount of Each Disbursement this Period 981.85 |
| City Hood River | State OR Zip Code 97031-7031 | |
| Purpose of Disbursement postage | Category/Type 001 | Transaction ID : B-S-7608 |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/12/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Heights Fuel Stop | | Date of Disbursement MM / DD / YYYY 08 / 01 / 2014 |
| Mailing Address 1413 12th Street | | Amount of Each Disbursement this Period 30.2 |
| City Hood River | State OR Zip Code 97031-1607 | |
| Purpose of Disbursement travel expense | Category/Type 001 | Transaction ID : B-S-7630 |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/12/14) |
| State: District: | | |

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|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 274 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Kanpai | | Date of Disbursement MM / DD / YYYY 08 / 02 / 2014 |
| Mailing Address 990 NW Newport Avenue | | Amount of Each Disbursement this Period 401.73 |
| City Bend | State OR Zip Code 97701-1616 | |
| Purpose of Disbursement meeting expense | Category/Type 001 | Transaction ID : B-S-7625 [MEMO ITEM] Subitemization of Chase Card Services(08/12/14) |
| 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. The Box Maker | | Date of Disbursement MM / DD / YYYY 08 / 05 / 2014 |
| Mailing Address PO Box 58968 | | Amount of Each Disbursement this Period 1086.75 |
| City Tukwila | State WA Zip Code 98138-1968 | |
| Purpose of Disbursement fundraising expense | Category/Type 001 | Transaction ID : B-S-7620 [MEMO ITEM] Subitemization of Chase Card Services(08/12/14) |
| 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. Heights Fuel Stop | | Date of Disbursement MM / DD / YYYY 08 / 05 / 2014 |
| Mailing Address 1413 12th Street | | Amount of Each Disbursement this Period 25 |
| City Hood River | State OR Zip Code 97031-1607 | |
| Purpose of Disbursement travel expense | Category/Type 001 | Transaction ID : B-S-7619 [MEMO ITEM] Subitemization of Chase Card Services(08/12/14) |
| 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: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 275 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Verve Media Group | | Date of Disbursement MM / DD / YYYY 08 / 02 / 2014 |
| Mailing Address 925 University Avenue Suite V | | Amount of Each Disbursement this Period 11.46 |
| City Sacramento | State CA Zip Code 95825-6709 | |
| Purpose of Disbursement email service | Category/Type 001 | Transaction ID : B-S-7629 [MEMO ITEM] Subitemization of Chase Card Services(08/12/14) |
| 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. Tetherow | | Date of Disbursement MM / DD / YYYY 08 / 04 / 2014 |
| Mailing Address 61240 Skyline Ranch Road | | Amount of Each Disbursement this Period 6466 |
| City Bend | State OR Zip Code 97702-3539 | |
| Purpose of Disbursement catering | Category/Type 001 | Transaction ID : B-S-7610 [MEMO ITEM] Subitemization of Chase Card Services(08/12/14) |
| 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. Tetherow | | Date of Disbursement MM / DD / YYYY 08 / 06 / 2014 |
| Mailing Address 61240 Skyline Ranch Road | | Amount of Each Disbursement this Period 1719.78 |
| City Bend | State OR Zip Code 97702-3539 | |
| Purpose of Disbursement fundraising expense | Category/Type 001 | Transaction ID : B-S-7611 [MEMO ITEM] Subitemization of Chase Card Services(08/12/14) |
| 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: | | |

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|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 276 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Tetherow | | Date of Disbursement MM / DD / YYYY 08 / 05 / 2014 |
| Mailing Address 61240 Skyline Ranch Road | | Amount of Each Disbursement this Period 2011.48 |
| City Bend | State OR Zip Code 97702-3539 | |
| Purpose of Disbursement fundraising expense | Category/Type 001 | Transaction ID : B-S-7614 |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/12/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Tetherow | | Date of Disbursement MM / DD / YYYY 08 / 04 / 2014 |
| Mailing Address 61240 Skyline Ranch Road | | Amount of Each Disbursement this Period 49.5 |
| City Bend | State OR Zip Code 97702-3539 | |
| Purpose of Disbursement fundraising expense | Category/Type 001 | Transaction ID : B-S-7622 |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/12/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Sunrise Cafe & Catering | | Date of Disbursement MM / DD / YYYY 08 / 08 / 2014 |
| Mailing Address 130 E Main Street | | Amount of Each Disbursement this Period 2016 |
| City Medford | State OR Zip Code 97501-6004 | |
| Purpose of Disbursement catering | Category/Type 001 | Transaction ID : B-S-7609 |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(08/12/14) |
| State: District: | | |

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|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 277 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Staples #2 | | Date of Disbursement MM / DD / YYYY 08 / 05 / 2014 |
| Mailing Address 45 E Stewart Avenue | | Amount of Each Disbursement this Period 97.97 |
| City Medford | State OR | Zip Code 97501-7924 |
| Purpose of Disbursement office supplies | Category/Type 001 | |
| Candidate Name | Transaction ID : B-S-7617 | |
| 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: | [MEMO ITEM] Subitemization of Chase Card Services(08/12/14) | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Dollar Rent A Car | | Date of Disbursement MM / DD / YYYY 08 / 05 / 2014 |
| Mailing Address 7000 NE Airport Way | | Amount of Each Disbursement this Period 1145.57 |
| City Portland | State OR | Zip Code 97218-1009 |
| Purpose of Disbursement travel expense | Category/Type 001 | |
| Candidate Name | Transaction ID : B-S-7616 | |
| 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: | [MEMO ITEM] Subitemization of Chase Card Services(08/12/14) | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Newport Avenue Market | | Date of Disbursement MM / DD / YYYY 08 / 05 / 2014 |
| Mailing Address 1121 NW Newport Avenue | | Amount of Each Disbursement this Period 260.87 |
| City Bend | State OR | Zip Code 97701-1619 |
| Purpose of Disbursement travel expense | Category/Type 001 | |
| Candidate Name | Transaction ID : B-S-7615 | |
| 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: | [MEMO ITEM] Subitemization of Chase Card Services(08/12/14) | |

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|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 278 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Deschutes Brewery | | Date of Disbursement MM / DD / YYYY 08 / 03 / 2014 |
| Mailing Address 901 SW Simpson Avenue | | Amount of Each Disbursement this Period 2908.96 |
| City Bend State OR Zip Code 97702-3118 | Purpose of Disbursement catering 001 Category/Type | |
| Candidate Name | | Transaction ID : B-S-7623 [MEMO ITEM] Subitemization of Chase Card Services(08/12/14) |
| Office Sought: House Senate President State: District: | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Piryx | | Date of Disbursement MM / DD / YYYY 08 / 12 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 2.01 |
| City San Francisco State CA Zip Code 94105-3716 | Purpose of Disbursement credit card processing fee 001 Category/Type | |
| Candidate Name | | Transaction ID : B-E-44050 |
| Office Sought: House Senate President State: District: | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. American Express | | Date of Disbursement MM / DD / YYYY 08 / 13 / 2014 |
| Mailing Address PO Box 360001 | | Amount of Each Disbursement this Period 850 |
| City Ft Lauderdale State FL Zip Code 33336-0001 | Purpose of Disbursement fundraising expense 001 Category/Type | |
| Candidate Name | | Transaction ID : B-E-44892 Original vendors exceeding reporting threshold itemized as memo transactions. |
| Office Sought: House Senate President State: District: | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 852.01 |
| 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 279 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Safeway | | Date of Disbursement MM / DD / YYYY 08 / 02 / 2014 |
| Mailing Address 642 NE 3rd Street | | Amount of Each Disbursement this Period 775 Transaction ID : B-S-7435 |
| City Bend State OR Zip Code 97701-4702 | Purpose of Disbursement fundraising expense Candidate Name Category/Type 001 | |
| 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: | [MEMO ITEM] Subitemization of American Express(08/13/14) |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. American Express | | Date of Disbursement MM / DD / YYYY 08 / 13 / 2014 |
| Mailing Address PO Box 360001 | | Amount of Each Disbursement this Period 775 Transaction ID : B-E-44893 |
| City Ft Lauderdale State FL Zip Code 33336-0001 | Purpose of Disbursement fundraising expense Candidate Name Category/Type 001 | |
| 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: | Original vendors exceeding reporting threshold itemized as memo transactions. |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. Safeway | | Date of Disbursement MM / DD / YYYY 08 / 02 / 2014 |
| Mailing Address 642 NE 3rd Street | | Amount of Each Disbursement this Period 775 Transaction ID : B-S-7436 |
| City Bend State OR Zip Code 97701-4702 | Purpose of Disbursement fundraising expense Candidate Name Category/Type 001 | |
| 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: | [MEMO ITEM] Subitemization of American Express(08/13/14) |

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| SUBTOTAL of Disbursements This Page (optional)..... | 775.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 280 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Columbia Bank | | Date of Disbursement MM / DD / YYYY 08 / 14 / 2014 |
| Mailing Address PO Box 980 | | Amount of Each Disbursement this Period Transaction ID : B-E-43983 10 |
| City Hood River | State OR | |
| Zip Code 97031-0032 | Purpose of Disbursement bank fee | Category/ Type 001 |
| 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. Piryx | | Date of Disbursement MM / DD / YYYY 08 / 14 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period Transaction ID : B-E-44051 5.75 |
| City San Francisco | State CA | |
| Zip Code 94105-3716 | Purpose of Disbursement credit card processing fee | Category/ Type 001 |
| 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. Piryx | | Date of Disbursement MM / DD / YYYY 08 / 16 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period Transaction ID : B-E-44052 36.54 |
| City San Francisco | State CA | |
| Zip Code 94105-3716 | Purpose of Disbursement credit card processing fee | Category/ Type 001 |
| 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)..... | 52.29 |
| 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 281 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Piryx | | Date of Disbursement MM / DD / YYYY 08 / 18 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 1.44 Transaction ID : B-E-44053 |
| City San Francisco | State CA | |
| Zip Code 94105-3716 | Purpose of Disbursement credit card processing fee | Category/ Type 001 |
| 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. Wall Street Storage | | Date of Disbursement MM / DD / YYYY 08 / 20 / 2014 |
| Mailing Address 1315 NW Wall Street | | Amount of Each Disbursement this Period 105 Transaction ID : B-E-44894 |
| City Bend | State OR | |
| Zip Code 97701 | Purpose of Disbursement rent | Category/ Type 001 |
| 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. Blame it on Jane LLC | | Date of Disbursement MM / DD / YYYY 08 / 21 / 2014 |
| Mailing Address 6224 22nd Street N | | Amount of Each Disbursement this Period 2200 Transaction ID : B-E-44896 |
| City Arlington | State VA | |
| Zip Code 22205-2002 | Purpose of Disbursement fundraising expense | Category/ Type 001 |
| 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: | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 2306.44 |
| 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 282 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Push Digital | | Date of Disbursement MM / DD / YYYY 08 / 21 / 2014 |
| Mailing Address PO Box 7431 | | Amount of Each Disbursement this Period 78.63 Transaction ID : B-E-44895 |
| City Columbia | State SC | |
| Zip Code 29202-7431 | Purpose of Disbursement digital media services | Category/ Type 001 |
| 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. Strategic Advance Services LLC | | Date of Disbursement MM / DD / YYYY 08 / 21 / 2014 |
| Mailing Address 611 Pennsylvania Avenue SE Suite 267 | | Amount of Each Disbursement this Period 1505.4 Transaction ID : B-E-44934 |
| City Washington | State DC | |
| Zip Code 20003-4303 | Purpose of Disbursement travel services | Category/ Type 001 |
| 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. Gregory P Walden | | Date of Disbursement MM / DD / YYYY 08 / 21 / 2014 |
| Mailing Address 1504 Sherman Avenue | | Amount of Each Disbursement this Period 164 Transaction ID : B-E-44897 |
| City Hood River | State OR | |
| Zip Code 97031-1456 | Purpose of Disbursement travel expense: mileage | Category/ Type 001 |
| 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) | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1748.03 |
| 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 283 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 14.38 Transaction ID : B-E-44054 |
| City San Francisco | State CA Zip Code 94105-3716 | |
| Purpose of Disbursement credit card processing fee | Category/Type 001 | |
| 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. Intuit - QuickBooks | | Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014 |
| Mailing Address 6200 Greenwich Drive | | Amount of Each Disbursement this Period 108 Transaction ID : B-E-45000 |
| City San Diego | State CA Zip Code 92122 | |
| Purpose of Disbursement service fee | Category/Type 001 | |
| 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. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 53.21 Transaction ID : B-E-44055 |
| City San Francisco | State CA Zip Code 94105-3716 | |
| Purpose of Disbursement credit card processing fee | Category/Type 001 | |
| 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: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 175.59 |
| 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 284 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | | |
|---|--|------------------------|---|
| Full Name (Last, First, Middle Initial) A. Central Oregon Builders Association | | | Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014 |
| Mailing Address 1051 NE 4th Street | | | Amount of Each Disbursement this Period 400 Transaction ID : B-E-44876 |
| City Bend | State OR | Zip Code 97701-4536 | |
| Purpose of Disbursement rent | Candidate Name | | Category/ Type 001 |
| 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. Piryx | | | Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014 |
| Mailing Address 144 2nd Street | | | Amount of Each Disbursement this Period 57.5 Transaction ID : B-E-44056 |
| City San Francisco | State CA | Zip Code 94105-3716 | |
| Purpose of Disbursement credit card processing fee | Candidate Name | | Category/ Type 001 |
| 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. Columbia Bank | | | Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2014 |
| Mailing Address PO Box 980 | | | Amount of Each Disbursement this Period 55.95 Transaction ID : B-E-45157 |
| City Hood River | State OR | Zip Code 97031-0032 | |
| Purpose of Disbursement bank fee | Candidate Name | | Category/ Type 001 |
| 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)..... | 513.45 |
| 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 285 OF 330 | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Port of Hood River | | Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014 |
| Mailing Address 1000 E Port Marina Drive | | Amount of Each Disbursement this Period 654 Transaction ID : B-E-44898 |
| City Hood River | State OR | |
| Zip Code 97031-1172 | Purpose of Disbursement rent | Category/ Type 001 |
| 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. Central Oregon Builders Association | | Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014 |
| Mailing Address 1051 NE 4th Street | | Amount of Each Disbursement this Period 487.57 Transaction ID : B-E-44875 |
| City Bend | State OR | |
| Zip Code 97701-4536 | Purpose of Disbursement rent/utilities | Category/ Type 001 |
| 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. Intuit - QuickBooks | | Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014 |
| Mailing Address 6200 Greenwich Drive | | Amount of Each Disbursement this Period 3888.88 Transaction ID : B-E-45002 |
| City San Diego | State CA | |
| Zip Code 92122 | Purpose of Disbursement taxes | Category/ Type 001 |
| 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)..... | 5030.45 |
| TOTAL This Period (last page this line number only)..... | |

Original vendors exceeding reporting threshold itemized as memo transactions.

**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 286 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Oregon Department of Revenue | | Date of Disbursement MM / DD / YYYY 09 / 02 / 2014 |
| Mailing Address PO Box 14800 | | Amount of Each Disbursement this Period 805.54 |
| City Salem | State OR | Zip Code 97310-0001 |
| Purpose of Disbursement taxes | Category/ Type 001 | |
| Candidate Name | | Transaction ID : B-S-7493 [MEMO ITEM] Subitemization of Intuit - QuickBooks(09/02/14) |
| Office Sought: | Disbursement For: 2014 | |
| <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: | District: | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Department of the Treasury - IRS | | Date of Disbursement MM / DD / YYYY 09 / 02 / 2014 |
| Mailing Address Internal Revenue Service Center | | Amount of Each Disbursement this Period 3054.42 |
| City Ogden | State UT | Zip Code 84201-0027 |
| Purpose of Disbursement taxes | Category/ Type 001 | |
| Candidate Name | | Transaction ID : B-S-7492 [MEMO ITEM] Subitemization of Intuit - QuickBooks(09/02/14) |
| Office Sought: | Disbursement For: 2014 | |
| <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: | District: | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. DC Department of Employment Services | | Date of Disbursement MM / DD / YYYY 09 / 02 / 2014 |
| Mailing Address 4058 Minnesota Avenue NE | | Amount of Each Disbursement this Period 28.92 |
| City Washington | State DC | Zip Code 20019-3540 |
| Purpose of Disbursement taxes | Category/ Type 001 | |
| Candidate Name | | Transaction ID : B-S-7494 [MEMO ITEM] Subitemization of Intuit - QuickBooks(09/02/14) |
| Office Sought: | Disbursement For: 2014 | |
| <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: | District: | |

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|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 287 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Moda Health | | Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014 |
| Mailing Address PO Box 40384 | | Amount of Each Disbursement this Period 1881.73 Transaction ID : B-E-43727 |
| City Portland | State OR | |
| Zip Code 97240-0384 | Purpose of Disbursement insurance premium | Category/ Type 001 |
| 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. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 5.75 Transaction ID : B-E-45047 |
| City San Francisco | State CA | |
| Zip Code 94105-3716 | Purpose of Disbursement credit card processing fee | Category/ Type 001 |
| 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. Judy L. Benton | | Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014 |
| Mailing Address 1767 12th Street Unit 144 | | Amount of Each Disbursement this Period 871.39 Transaction ID : B-E-45008 |
| City Hood River | State OR | |
| Zip Code 97031-9531 | Purpose of Disbursement salary | Category/ Type 001 |
| 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)..... | 2758.87 |
| 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 288 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Jon Kunkel | | Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014 |
| Mailing Address 61281 Kwinnum Drive | | Amount of Each Disbursement this Period 2053.94 Transaction ID : B-E-45006 |
| City Bend | State OR Zip Code 97702-2772 | |
| Purpose of Disbursement salary | Category/Type 001 | |
| 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. Andrew Malcolm | | Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014 |
| Mailing Address 1724 T Street NW Apt. 21 | | Amount of Each Disbursement this Period 447.33 Transaction ID : B-E-45005 |
| City Washington | State DC Zip Code 20009-7112 | |
| Purpose of Disbursement salary | Category/Type 001 | |
| 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. Marta A Simons | | Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014 |
| Mailing Address 2870 Prospect Avenue | | Amount of Each Disbursement this Period 4305.5 Transaction ID : B-E-45011 |
| City Hood River | State OR Zip Code 97031-1061 | |
| Purpose of Disbursement salary | Category/Type 001 | |
| 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: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 6806.77 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 289 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Melissa Stiles | | Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014 |
| Mailing Address 2426 Meadow Creek Drive | | Amount of Each Disbursement this Period 826.63 Transaction ID : B-E-45012 |
| City Medford | State OR | |
| Zip Code 97504-3629 | Purpose of Disbursement salary | Category/ Type 001 |
| 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. Marisa A Wonsyld | | Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014 |
| Mailing Address 1767 12th Street, #126 | | Amount of Each Disbursement this Period 1097.98 Transaction ID : B-E-45010 |
| City Hood River | State OR | |
| Zip Code 97031-9531 | Purpose of Disbursement salary | Category/ Type 001 |
| 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. Established Merchant Focus | | Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014 |
| Mailing Address 5940 Venture Drive | | Amount of Each Disbursement this Period 10 Transaction ID : B-E-45161 |
| City Dublin | State OH | |
| Zip Code 43017-2245 | Purpose of Disbursement credit card processing fee | Category/ Type 001 |
| 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: | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1934.61 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 290 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 57.5 Transaction ID : B-E-45048 |
| City San Francisco | State CA Zip Code 94105-3716 | |
| Purpose of Disbursement credit card processing fee | Category/Type 001 | |
| 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. TG Fundraising | | Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014 |
| Mailing Address PO Box 13470 | | Amount of Each Disbursement this Period 14310.5 Transaction ID : B-E-44874 |
| City Portland | State OR Zip Code 97213-0470 | |
| Purpose of Disbursement fundraising services | Category/Type 001 | |
| 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. Aristotle/Complete Campaigns | | Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014 |
| Mailing Address 205 Pennsylvania Avenue SE | | Amount of Each Disbursement this Period 130 Transaction ID : B-E-43988 |
| City Washington | State DC Zip Code 20003-1164 | |
| Purpose of Disbursement credit card processing fee | Category/Type 001 | |
| 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: | | |

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|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 14498.00 |
| 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 291 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. American Express | | Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address PO Box 360001 | | Amount of Each Disbursement this Period 87 Transaction ID : B-E-45163 |
| City Ft Lauderdale | State FL | |
| Zip Code 33336-0001 | Purpose of Disbursement credit card processing fee | Category/ Type 001 |
| 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. Bogart Associates, Inc. | | Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address 217 Third Street, SE | | Amount of Each Disbursement this Period 3678.63 Transaction ID : B-E-44886 |
| City Washington | State DC | |
| Zip Code 20003 | Purpose of Disbursement fundraising expense | Category/ Type 001 |
| 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. CenturyLink | | Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address PO Box 2961 | | Amount of Each Disbursement this Period 210.68 Transaction ID : B-E-44879 |
| City Phoenix | State AZ | |
| Zip Code 85062-2961 | Purpose of Disbursement phone/internet service | Category/ Type 001 |
| 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: | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) | 3976.31 |
| TOTAL This Period (last page this line number only) | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 292 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. CenturyLink | | Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address PO Box 1320 | | Amount of Each Disbursement this Period 644.30 Transaction ID : B-E-44890 |
| City Charlotte | State NC | |
| Zip Code 28201-1320 | Purpose of Disbursement phone service | Category/ Type 001 |
| 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. First Data Global Leasing | | Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address PO Box 407092 | | Amount of Each Disbursement this Period 36.98 Transaction ID : B-E-45162 |
| City Ft Lauderdale | State FL | |
| Zip Code 33340-7092 | Purpose of Disbursement equipment rent | Category/ Type 001 |
| 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. FTIN Strategies | | Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address 325 E Jimmie Leeds Road Suite 117 | | Amount of Each Disbursement this Period 550 Transaction ID : B-E-44883 |
| City Galloway | State NJ | |
| Zip Code 08205-4126 | Purpose of Disbursement software fee | Category/ Type 001 |
| 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: | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 644.30 |
| 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 293 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. InfoStructure

Full Name (Last, First, Middle Initial)
Mailing Address 288 S Pacific Highway

City Talent State OR Zip Code 97540-6649

Purpose of Disbursement internet
Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 05 / 2014

Amount of Each Disbursement this Period: 69.53
Transaction ID : B-E-44884

Category/Type: 001

B. Piryx

Full Name (Last, First, Middle Initial)
Mailing Address 144 2nd Street

City San Francisco State CA Zip Code 94105-3716

Purpose of Disbursement credit card processing fee
Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 05 / 2014

Amount of Each Disbursement this Period: 5.75
Transaction ID : B-E-45049

Category/Type: 001

C. Print It

Full Name (Last, First, Middle Initial)
Mailing Address 1802 Cascade Avenue

City Hood River State OR Zip Code 97031-3122

Purpose of Disbursement printing
Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 05 / 2014

Amount of Each Disbursement this Period: 172.5
Transaction ID : B-E-44881

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 247.78

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 294 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | | | | | | | | | | | | |
|--|-------|--|-------|----------|------------|-----|------------|--|----|------|----|--|------|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement | | | | | | | | | | | |
| A. Purchase Power | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>05</td> <td></td> <td>2014</td> </tr> </table> | | M M | / | D D | / | Y Y Y Y | 09 | | 05 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | |
| 09 | | 05 | | 2014 | | | | | | | | | |
| Mailing Address PO Box 856042 | | Amount of Each Disbursement this Period | | | | | | | | | | | |
| <table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Louisville</td> <td>KY</td> <td>40285-6042</td> </tr> </table> | | City | State | Zip Code | Louisville | KY | 40285-6042 | <table border="1"> <tr> <td>1000</td> </tr> </table> | | 1000 | | | |
| City | State | Zip Code | | | | | | | | | | | |
| Louisville | KY | 40285-6042 | | | | | | | | | | | |
| 1000 | | | | | | | | | | | | | |
| Purpose of Disbursement postage | | Transaction ID : B-E-44878 | | | | | | | | | | | |
| Candidate Name | | Category/Type | | | | | | | | | | | |
| 001 | | | | | | | | | | | | | |
| Office Sought: | | Disbursement For: 2014 | | | | | | | | | | | |
| <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | |

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|--|-------|--|-------|----------|----------|-----|------------|--|----|------|----|--|------|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement | | | | | | | | | | | |
| B. Push Digital | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>05</td> <td></td> <td>2014</td> </tr> </table> | | M M | / | D D | / | Y Y Y Y | 09 | | 05 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | |
| 09 | | 05 | | 2014 | | | | | | | | | |
| Mailing Address PO Box 7431 | | Amount of Each Disbursement this Period | | | | | | | | | | | |
| <table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Columbia</td> <td>SC</td> <td>29202-7431</td> </tr> </table> | | City | State | Zip Code | Columbia | SC | 29202-7431 | <table border="1"> <tr> <td>2500</td> </tr> </table> | | 2500 | | | |
| City | State | Zip Code | | | | | | | | | | | |
| Columbia | SC | 29202-7431 | | | | | | | | | | | |
| 2500 | | | | | | | | | | | | | |
| Purpose of Disbursement online advertising | | Transaction ID : B-E-44877 | | | | | | | | | | | |
| Candidate Name | | Category/Type | | | | | | | | | | | |
| 001 | | | | | | | | | | | | | |
| Office Sought: | | Disbursement For: 2014 | | | | | | | | | | | |
| <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | |

| | | | | | | | | | | | | | |
|--|-------|--|-------|----------|----------|-----|------------|--|----|--------|----|--|------|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement | | | | | | | | | | | |
| C. Push Digital | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>05</td> <td></td> <td>2014</td> </tr> </table> | | M M | / | D D | / | Y Y Y Y | 09 | | 05 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | |
| 09 | | 05 | | 2014 | | | | | | | | | |
| Mailing Address PO Box 7431 | | Amount of Each Disbursement this Period | | | | | | | | | | | |
| <table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Columbia</td> <td>SC</td> <td>29202-7431</td> </tr> </table> | | City | State | Zip Code | Columbia | SC | 29202-7431 | <table border="1"> <tr> <td>374.94</td> </tr> </table> | | 374.94 | | | |
| City | State | Zip Code | | | | | | | | | | | |
| Columbia | SC | 29202-7431 | | | | | | | | | | | |
| 374.94 | | | | | | | | | | | | | |
| Purpose of Disbursement digital media service | | Transaction ID : B-E-44885 | | | | | | | | | | | |
| Candidate Name | | Category/Type | | | | | | | | | | | |
| 001 | | | | | | | | | | | | | |
| Office Sought: | | Disbursement For: 2014 | | | | | | | | | | | |
| <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 3874.94 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 295 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Push Digital | | Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address PO Box 7431 | | Amount of Each Disbursement this Period 2000 Transaction ID : B-E-44909 |
| City Columbia | State SC | |
| Zip Code 29202-7431 | Purpose of Disbursement digital media service | Category/ Type 001 |
| 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. Something Else Strategies LLC | | Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address 112 Lantern Ridge Drive | | Amount of Each Disbursement this Period 51333.67 Transaction ID : B-E-44873 |
| City Easley | State SC | |
| Zip Code 29642-8289 | Purpose of Disbursement filming production cost | Category/ Type 001 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) c. The University Club of Portland | | Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address 1225 SW 6th Avenue | | Amount of Each Disbursement this Period 112 Transaction ID : B-E-44908 |
| City Portland | State OR | |
| Zip Code 97204-1001 | Purpose of Disbursement facility use fee | Category/ Type 001 |
| 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: | |

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|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 53445.67 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 296 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | | | |
|---|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Verizon Wireless | | | Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014 | |
| Mailing Address PO Box 660108 | | | Amount of Each Disbursement this Period 865.96 | |
| City Dallas | State TX | Zip Code 75266 | Transaction ID : B-E-44869 | |
| Purpose of Disbursement phone service | | Category/ Type 001 | | |
| Candidate Name | | | | |
| Office Sought: | 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. Verizon Wireless | | | Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014 | |
| Mailing Address PO Box 660108 | | | Amount of Each Disbursement this Period 50.08 | |
| City Dallas | State TX | Zip Code 75266 | Transaction ID : B-E-44880 | |
| Purpose of Disbursement phone service | | Category/ Type 001 | | |
| Candidate Name | | | | |
| Office Sought: | 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. VISA Cardmember Service | | | Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014 | |
| Mailing Address PO Box 790408 | | | Amount of Each Disbursement this Period 67.1 | |
| City Saint Louis | State MO | Zip Code 63179-0408 | Transaction ID : B-E-44961 | |
| Purpose of Disbursement travel expense/internet | | Category/ Type 001 | | |
| Candidate Name | | | | |
| Office Sought: | 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: | | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 983.14 |
| 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 297 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. GoGo Air | | Date of Disbursement MM / DD / YYYY 07 / 26 / 2014 |
| Mailing Address 1250 N Arlington Heights Road Suite 500 | | Amount of Each Disbursement this Period 44.95 |
| City Itasca State IL Zip Code 60143-1216 | Purpose of Disbursement internet service 001 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) | Transaction ID : B-S-7465 [MEMO ITEM] Subitemization of VISA Cardmember Service(09/05/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. DC Parking | | Date of Disbursement MM / DD / YYYY 07 / 16 / 2014 |
| Mailing Address 949 Constitution Ave | | Amount of Each Disbursement this Period 1.25 |
| City Washington State DC Zip Code 20003 | Purpose of Disbursement travel expense 001 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) | Transaction ID : B-S-7458 [MEMO ITEM] Subitemization of VISA Cardmember Service(09/05/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. DC Parking | | Date of Disbursement MM / DD / YYYY 07 / 16 / 2014 |
| Mailing Address 949 Constitution Ave | | Amount of Each Disbursement this Period 2.95 |
| City Washington State DC Zip Code 20003 | Purpose of Disbursement travel expense 001 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) | Transaction ID : B-S-7459 [MEMO ITEM] Subitemization of VISA Cardmember Service(09/05/14) |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 298 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. DC Parking | | Date of Disbursement MM / DD / YYYY 07 / 16 / 2014 |
| Mailing Address 949 Constitution Ave | | Amount of Each Disbursement this Period 4.45 |
| City Washington | State DC Zip Code 20003 | |
| Purpose of Disbursement travel expense | Category/Type 001 | Transaction ID : B-S-7460 |
| 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) | [MEMO ITEM] Subitemization of VISA Cardmember Service(09/05/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. DC Parking | | Date of Disbursement MM / DD / YYYY 07 / 22 / 2014 |
| Mailing Address 949 Constitution Ave | | Amount of Each Disbursement this Period 4.45 |
| City Washington | State DC Zip Code 20003 | |
| Purpose of Disbursement travel expense | Category/Type 001 | Transaction ID : B-S-7461 |
| 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) | [MEMO ITEM] Subitemization of VISA Cardmember Service(09/05/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. DC Parking | | Date of Disbursement MM / DD / YYYY 07 / 23 / 2014 |
| Mailing Address 949 Constitution Ave | | Amount of Each Disbursement this Period 3.45 |
| City Washington | State DC Zip Code 20003 | |
| Purpose of Disbursement travel expense | Category/Type 001 | Transaction ID : B-S-7462 |
| 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) | [MEMO ITEM] Subitemization of VISA Cardmember Service(09/05/14) |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 300 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. VISA Cardmember Service | | Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 994.07 |
| City Saint Louis State MO Zip Code 63179-0408 | Purpose of Disbursement software support/shipping/travel expense 001 | |
| Candidate Name | | Transaction ID : B-E-44962 |
| 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: | | Original vendors exceeding reporting threshold itemized as memo transactions. |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. UPS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2014 |
| Mailing Address 55 Glenlake Parkway NE | | Amount of Each Disbursement this Period 29.37 |
| City Atlanta State GA Zip Code 30328 | Purpose of Disbursement shipping 001 | |
| Candidate Name | | Transaction ID : B-S-7468 |
| 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: | | [MEMO ITEM] Subitemization of VISA Cardmember Service(09/05/14) |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. UPS | | Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2014 |
| Mailing Address 55 Glenlake Parkway NE | | Amount of Each Disbursement this Period 214.81 |
| City Atlanta State GA Zip Code 30328 | Purpose of Disbursement shipping 001 | |
| Candidate Name | | Transaction ID : B-S-7470 |
| 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: | | [MEMO ITEM] Subitemization of VISA Cardmember Service(09/05/14) |

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| SUBTOTAL of Disbursements This Page (optional)..... | 994.07 |
| 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 301 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. UPS | | Date of Disbursement MM / DD / YYYY 08 / 10 / 2014 |
| Mailing Address 55 Glenlake Parkway NE | | Amount of Each Disbursement this Period 53.85 |
| City Atlanta | State GA Zip Code 30328 | |
| Purpose of Disbursement shipping | Category/Type 001 | Transaction ID : B-S-7473 |
| 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) | [MEMO ITEM] Subitemization of VISA Cardmember Service(09/05/14) |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Aristotle/Complete Campaigns | | Date of Disbursement MM / DD / YYYY 08 / 01 / 2014 |
| Mailing Address 205 Pennsylvania Avenue SE | | Amount of Each Disbursement this Period 250 |
| City Washington | State DC Zip Code 20003-1164 | |
| Purpose of Disbursement software support | Category/Type 001 | Transaction ID : B-S-7469 |
| 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) | [MEMO ITEM] Subitemization of VISA Cardmember Service(09/05/14) |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Tetherow | | Date of Disbursement MM / DD / YYYY 08 / 04 / 2014 |
| Mailing Address 61240 Skyline Ranch Road | | Amount of Each Disbursement this Period 392.1 |
| City Bend | State OR Zip Code 97702-3539 | |
| Purpose of Disbursement fundraising expense | Category/Type 001 | Transaction ID : B-S-7472 |
| 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) | [MEMO ITEM] Subitemization of VISA Cardmember Service(09/05/14) |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 302 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. UPS | | Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014 |
| Mailing Address 55 Glenlake Parkway NE | | Amount of Each Disbursement this Period 37.96 |
| City Atlanta | State GA Zip Code 30328 | |
| Purpose of Disbursement shipping | Category/Type 001 | Transaction ID : B-S-7467 [MEMO ITEM] Subitemization of VISA Cardmember Service(09/05/14) |
| 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. VISA Cardmember Service | | Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 35 |
| City Saint Louis | State MO Zip Code 63179-0408 | |
| Purpose of Disbursement internet service | Category/Type 001 | Transaction ID : B-E-44963 Original vendors exceeding reporting threshold itemized as memo transactions. |
| 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. Verizon Wireless | | Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014 |
| Mailing Address PO Box 660108 | | Amount of Each Disbursement this Period 35 |
| City Dallas | State TX Zip Code 75266 | |
| Purpose of Disbursement internet service | Category/Type 001 | Transaction ID : B-S-7474 [MEMO ITEM] Subitemization of VISA Cardmember Service(09/05/14) |
| 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: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 35.00 |
| 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 303 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Jon Kunkel | | Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address 61281 Kwinnum Drive | | Amount of Each Disbursement this Period 62 Transaction ID : B-E-44887 |
| City Bend | State OR Zip Code 97702-2772 | |
| Purpose of Disbursement travel expense: mileage | Category/Type 001 | |
| 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: | | |

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|---|--|---|
| Full Name (Last, First, Middle Initial) B. PacJet Inc | | Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014 |
| Mailing Address 2244 Carton Way | | Amount of Each Disbursement this Period 2723.39 Transaction ID : B-E-44724 |
| City Grants Pass | State OR Zip Code 97526-8270 | |
| Purpose of Disbursement travel expense | Category/Type 001 | |
| 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. Diageo PAC | | Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014 |
| Mailing Address 600 Pennsylvania Avenue SE Suite 304 | | Amount of Each Disbursement this Period 3202.24 Transaction ID : B-I-45181 |
| City Washington | State DC Zip Code 20003-4345 | |
| Purpose of Disbursement Inkind: fundraising event refreshments | 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: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 5987.63 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 304 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 28.76 Transaction ID : B-E-45050 |
| City San Francisco | State CA Zip Code 94105-3716 | |
| Purpose of Disbursement credit card processing fee | Category/Type 001 | |
| 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: | | |

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|---|--|---|
| Full Name (Last, First, Middle Initial) B. Mark Dunn | | Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014 |
| Mailing Address 4094 N Hackberry Way | | Amount of Each Disbursement this Period 400 Transaction ID : B-I-45179 |
| City Boise | State ID Zip Code 83702-1662 | |
| Purpose of Disbursement Inkind: raffle item: gift cards | 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. Laura Hard | | Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014 |
| Mailing Address 13323 E San Juan Lane | | Amount of Each Disbursement this Period 250 Transaction ID : B-I-45173 |
| City Spokane Valley | State WA Zip Code 99206-7041 | |
| Purpose of Disbursement Inkind: raffle item: gift certificate | 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: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 678.76 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 305 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Leigh T. Johnson | | Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014 |
| Mailing Address 3820 Hillcrest Road | | Amount of Each Disbursement this Period 635.9 Transaction ID : B-I-45169 |
| City Medford | State OR | |
| Zip Code 97504-9322 | Purpose of Disbursement Inkind: raffle item: Harry & David certificates | 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. Jay R. Sullivan | | Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014 |
| Mailing Address 6120 Vernon Terrace | | Amount of Each Disbursement this Period 1000 Transaction ID : B-I-45170 |
| City Alexandria | State VA | |
| Zip Code 22307-1151 | Purpose of Disbursement Inkind: raffle item: event tickets | 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. Mary George Sullivan | | Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014 |
| Mailing Address 6120 Vernon Terrace | | Amount of Each Disbursement this Period 720 Transaction ID : B-I-45171 |
| City Alexandria | State VA | |
| Zip Code 22307-1151 | Purpose of Disbursement Inkind: raffle item: event tickets | 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: | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 2355.90 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 306 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. William M. Webb | | Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014 |
| Mailing Address 9908 Lindel Lane | | Amount of Each Disbursement this Period 250 Transaction ID : B-I-45180 |
| City Vienna | State VA | |
| Zip Code 22181-4033 | Purpose of Disbursement Inkind: raffle item: gift card | 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. Transfirst | | Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014 |
| Mailing Address 12202 Airport Way Suite 100 | | Amount of Each Disbursement this Period 138.12 Transaction ID : B-E-45164 |
| City Broomfield | State CO | |
| Zip Code 80021 | Purpose of Disbursement credit card processing fee | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | |
| State: District: | Other (specify) | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) c. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 14.38 Transaction ID : B-E-45051 |
| City San Francisco | State CA | |
| Zip Code 94105-3716 | Purpose of Disbursement credit card processing fee | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | |
| State: District: | Other (specify) | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 402.50 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 307 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Chase Card Services | | Date of Disbursement MM / DD / YYYY 09 / 12 / 2014 |
| Mailing Address PO Box 9001074 | | Amount of Each Disbursement this Period 2293.34 |
| City Louisville | State KY | |
| Zip Code 40290-1074 | Purpose of Disbursement shipping/web hosting services/phone service/catering/event ticket/logo rent/travel expense/postage | Transaction ID : B-E-45069 |
| Candidate Name | Category/Type 001 | |
| 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) | Original vendors exceeding reporting threshold itemized as memo transactions. |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. FedEx | | Date of Disbursement MM / DD / YYYY 08 / 13 / 2014 |
| Mailing Address PO Box 7221 | | Amount of Each Disbursement this Period 37.39 |
| City Pasadena | State CA | |
| Zip Code 91109-7321 | Purpose of Disbursement shipping | Transaction ID : B-S-7633 |
| Candidate Name | Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(09/12/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. US Postal Service | | Date of Disbursement MM / DD / YYYY 08 / 19 / 2014 |
| Mailing Address 408 Cascade Avenue | | Amount of Each Disbursement this Period 13.1 |
| City Hood River | State OR | |
| Zip Code 97031-7031 | Purpose of Disbursement postage | Transaction ID : B-S-7640 |
| Candidate Name | Category/Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(09/12/14) |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 2293.34 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 308 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. 4imprint | | Date of Disbursement MM / DD / YYYY 08 / 15 / 2014 |
| Mailing Address PO Box 320 | | Amount of Each Disbursement this Period 1378.06 |
| City Oshkosh | State WI | |
| Zip Code 54903-0320 | Purpose of Disbursement logo pens | [MEMO ITEM] Subitemization of Chase Card Services(09/12/14) |
| Candidate Name | 001 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. Heights Fuel Stop | | Date of Disbursement MM / DD / YYYY 08 / 15 / 2014 |
| Mailing Address 1413 12th Street | | Amount of Each Disbursement this Period 24.09 |
| City Hood River | State OR | |
| Zip Code 97031-1607 | Purpose of Disbursement travel expense | [MEMO ITEM] Subitemization of Chase Card Services(09/12/14) |
| Candidate Name | 001 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. Roxy Ann Winery | | Date of Disbursement MM / DD / YYYY 08 / 11 / 2014 |
| Mailing Address 3285 Hillcrest Road | | Amount of Each Disbursement this Period 812.7 |
| City Medford | State OR | |
| Zip Code 97504-9318 | Purpose of Disbursement catering | [MEMO ITEM] Subitemization of Chase Card Services(09/12/14) |
| Candidate Name | 001 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)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 309 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. GoDaddy.com | | Date of Disbursement MM / DD / YYYY 08 / 20 / 2014 |
| Mailing Address 14455 N Hayden Road Suite 219 | | Amount of Each Disbursement this Period 14.99 |
| City Scottsdale | State AZ | |
| Zip Code 85260 | Purpose of Disbursement web hosting services | Transaction ID : B-S-7634 |
| Candidate Name | Category/ Type 001 | |
| 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) | [MEMO ITEM] Subitemization of Chase Card Services(09/12/14) |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. The Conference Group | | Date of Disbursement MM / DD / YYYY 09 / 12 / 2014 |
| Mailing Address 254 Chapman Road | | Amount of Each Disbursement this Period 44.19 |
| City Newark | State DE | |
| Zip Code 19702-5413 | Purpose of Disbursement phone service | Transaction ID : B-E-44871 |
| Candidate Name | Category/ Type 001 | |
| 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. Andrew Malcolm | | Date of Disbursement MM / DD / YYYY 09 / 12 / 2014 |
| Mailing Address 1724 T Street NW Apt. 21 | | Amount of Each Disbursement this Period 13.58 |
| City Washington | State DC | |
| Zip Code 20009-7112 | Purpose of Disbursement travel expense: cab fare | Transaction ID : B-E-44870 |
| Candidate Name | Category/ Type 001 | |
| 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) | Original vendors exceeding reporting threshold itemized as memo transactions. |
| State: District: | | |

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|---|-------|
| SUBTOTAL of Disbursements This Page (optional)..... | 57.77 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 310 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | | | |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Grand Valley Consulting LLC | | | Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014 | |
| Mailing Address 213 Ashby Street | | | Amount of Each Disbursement this Period 9500 | |
| City Alexandria | State VA | Zip Code 22305 | Transaction ID : B-E-44725 | |
| Purpose of Disbursement fundraising services | | Category/ Type 001 | | |
| 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. Piryx | | | Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014 | |
| Mailing Address 144 2nd Street | | | Amount of Each Disbursement this Period 69.04 | |
| City San Francisco | State CA | Zip Code 94105-3716 | Transaction ID : B-E-45052 | |
| Purpose of Disbursement credit card processing fee | | Category/ Type 001 | | |
| 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. Piryx | | | Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014 | |
| Mailing Address 144 2nd Street | | | Amount of Each Disbursement this Period 67.58 | |
| City San Francisco | State CA | Zip Code 94105-3716 | Transaction ID : B-E-45053 | |
| Purpose of Disbursement credit card processing fee | | Category/ Type 001 | | |
| 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: | | | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 9636.62 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 311 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Jon Kunkel | | Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014 |
| Mailing Address 61281 Kwinnum Drive | | Amount of Each Disbursement this Period 685.65 Transaction ID : B-E-45023 |
| City Bend | State OR Zip Code 97702-2772 | |
| Purpose of Disbursement travel expense: mileage, lodging, rental car, gas/table | | Original vendors exceeding reporting threshold itemized as memo transactions. |
| Candidate Name | | |
| Office Sought: | Disbursement For: 2014 | Category/Type 001 |
| <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Biddle Road Chevron | | Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2014 |
| Mailing Address 2232 Biddle Road | | Amount of Each Disbursement this Period 47.64 Transaction ID : B-S-7504 |
| City Medford | State OR Zip Code 97504-5250 | |
| Purpose of Disbursement travel expense | | [MEMO ITEM] Subitemization of Jon Kunkel(09/17/14) |
| Candidate Name | | |
| Office Sought: | Disbursement For: 2014 | Category/Type 001 |
| <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Hampton Inn Medford | | Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2014 |
| Mailing Address 1122 Morrow Road | | Amount of Each Disbursement this Period 142.56 Transaction ID : B-S-7503 |
| City Medford | State OR Zip Code 97504-4607 | |
| Purpose of Disbursement travel expense | | [MEMO ITEM] Subitemization of Jon Kunkel(09/17/14) |
| Candidate Name | | |
| Office Sought: | Disbursement For: 2014 | Category/Type 001 |
| <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 685.65 |
| 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 312 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Aristotle/Complete Campaigns | | Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014 |
| Mailing Address 205 Pennsylvania Avenue SE | | Amount of Each Disbursement this Period 120 Transaction ID : B-E-44095 |
| City Washington State DC Zip Code 20003-1164 | Purpose of Disbursement credit card processing fee Candidate Name Category/Type 001 | |
| 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. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 141.21 Transaction ID : B-E-45054 |
| City San Francisco State CA Zip Code 94105-3716 | Purpose of Disbursement credit card processing fee Candidate Name Category/Type 001 | |
| 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. Wall Street Storage | | Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2014 |
| Mailing Address 1315 NW Wall Street | | Amount of Each Disbursement this Period 105 Transaction ID : B-E-44718 |
| City Bend State OR Zip Code 97701 | Purpose of Disbursement rent Candidate Name Category/Type 001 | |
| 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: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 366.21 |
| 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 313 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 25.32 Transaction ID : B-E-45055 |
| City San Francisco | State CA Zip Code 94105-3716 | |
| Purpose of Disbursement credit card processing fee | Category/Type 001 | |
| 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. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 24.44 Transaction ID : B-E-45056 |
| City San Francisco | State CA Zip Code 94105-3716 | |
| Purpose of Disbursement credit card processing fee | Category/Type 001 | |
| 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. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 8.63 Transaction ID : B-E-45057 |
| City San Francisco | State CA Zip Code 94105-3716 | |
| Purpose of Disbursement credit card processing fee | Category/Type 001 | |
| 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: | | |

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|---|-------|
| SUBTOTAL of Disbursements This Page (optional)..... | 58.39 |
| 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 314 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 647.63 Transaction ID : B-E-45058 |
| City San Francisco State CA Zip Code 94105-3716 | Purpose of Disbursement credit card processing fee Candidate Name Category/Type 001 | |
| 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. Pitney Bowes | | Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014 |
| Mailing Address PO Box 856390 | | Amount of Each Disbursement this Period 255.5 Transaction ID : B-E-44722 |
| City Louisville State KY Zip Code 40285-6390 | Purpose of Disbursement rent Candidate Name Category/Type 001 | |
| 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. Push Digital | | Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014 |
| Mailing Address PO Box 7431 | | Amount of Each Disbursement this Period 234.03 Transaction ID : B-E-44719 |
| City Columbia State SC Zip Code 29202-7431 | Purpose of Disbursement digital media services Candidate Name Category/Type 001 | |
| 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: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 647.63 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 315 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | | | | | | | | | | | | |
|--|---|--|---|---------|---|-----|---|---------|----|--|----|--|------|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement | | | | | | | | | | | |
| A. TG Fundraising | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table> | | M M | / | D D | / | Y Y Y Y | 09 | | 24 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | |
| 09 | | 24 | | 2014 | | | | | | | | | |
| Mailing Address PO Box 13470 | | Amount of Each Disbursement this Period | | | | | | | | | | | |
| City Portland State OR Zip Code 97213-0470 | | <table border="1"> <tr> <td>2000</td> </tr> </table> | | 2000 | | | | | | | | | |
| 2000 | | | | | | | | | | | | | |
| Purpose of Disbursement fundraising services | | Transaction ID : B-E-44723 | | | | | | | | | | | |
| 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: | | | | | | | | | | | | | |

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|--|---|--|---|---------|---|-----|---|---------|----|--|----|--|------|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement | | | | | | | | | | | |
| B. Piryx | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>25</td> <td></td> <td>2014</td> </tr> </table> | | M M | / | D D | / | Y Y Y Y | 09 | | 25 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | |
| 09 | | 25 | | 2014 | | | | | | | | | |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period | | | | | | | | | | | |
| City San Francisco State CA Zip Code 94105-3716 | | <table border="1"> <tr> <td>249.58</td> </tr> </table> | | 249.58 | | | | | | | | | |
| 249.58 | | | | | | | | | | | | | |
| Purpose of Disbursement credit card processing fee | | Transaction ID : B-E-45059 | | | | | | | | | | | |
| 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) | | Date of Disbursement | | | | | | | | | | | |
| c. Chase Card Services | | <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>26</td> <td></td> <td>2014</td> </tr> </table> | | M M | / | D D | / | Y Y Y Y | 09 | | 26 | | 2014 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | |
| 09 | | 26 | | 2014 | | | | | | | | | |
| Mailing Address PO Box 9001074 | | Amount of Each Disbursement this Period | | | | | | | | | | | |
| City Louisville State KY Zip Code 40290-1074 | | <table border="1"> <tr> <td>27121.11</td> </tr> </table> | | 27121.11 | | | | | | | | | |
| 27121.11 | | | | | | | | | | | | | |
| Purpose of Disbursement shipping/email service/logo t-shirts/web hosting service/catering/fundraising expense/meeting expenses | | Transaction ID : B-E-45070 | | | | | | | | | | | |
| 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: | | | | | | | | | | | | | |

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|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 29370.69 |
| 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 316 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

Full Name (Last, First, Middle Initial)
A. FedEx

Mailing Address PO Box 7221

City Pasadena State CA Zip Code 91109-7321

Purpose of Disbursement shipping

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 11 / 2014

Amount of Each Disbursement this Period: 34.61

Transaction ID : B-S-7648

[MEMO ITEM]
Subitemization of Chase Card Services(09/26/14)

Full Name (Last, First, Middle Initial)
B. Capitol Hill Club

Mailing Address 300 1st Street SE

City Washington State DC Zip Code 20003-1801

Purpose of Disbursement meeting expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 25 / 2014

Amount of Each Disbursement this Period: 58.41

Transaction ID : B-S-7642

[MEMO ITEM]
Subitemization of Chase Card Services(09/26/14)

Full Name (Last, First, Middle Initial)
c. Johnny's Half Shell

Mailing Address 400 N Capitol Street NW Suite 175

City Washington State DC Zip Code 20001-1511

Purpose of Disbursement catering

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 08 / 2014

Amount of Each Disbursement this Period: 390

Transaction ID : B-S-7645

[MEMO ITEM]
Subitemization of Chase Card Services(09/26/14)

SUBTOTAL of Disbursements This Page (optional)..... 0.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 317 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. GoDaddy.com | | Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2014 |
| Mailing Address 14455 N Hayden Road Suite 219 | | Amount of Each Disbursement this Period 14.99 |
| City Scottsdale | State AZ | Zip Code 85260 |
| Purpose of Disbursement web hosting services | Category/Type 001 | |
| Candidate Name | Transaction ID : B-S-7651 | |
| 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: | [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Mindy's Catering | | Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014 |
| Mailing Address 4816 MacArthur Blvd NW | | Amount of Each Disbursement this Period 314.97 |
| City Washington | State DC | Zip Code 20007 |
| Purpose of Disbursement catering | Category/Type 001 | |
| Candidate Name | Transaction ID : B-S-7646 | |
| 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: | [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Staples #2 | | Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014 |
| Mailing Address 45 E Stewart Avenue | | Amount of Each Disbursement this Period 29.77 |
| City Medford | State OR | Zip Code 97501-7924 |
| Purpose of Disbursement office supplies | Category/Type 001 | |
| Candidate Name | Transaction ID : B-S-7665 | |
| 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: | [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) | |

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|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 318 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Deschutes Brewery | | Date of Disbursement MM / DD / YYYY 09 / 05 / 2014 |
| Mailing Address 901 SW Simpson Avenue | | Amount of Each Disbursement this Period 122 |
| City Bend | State OR | Zip Code 97702-3118 |
| Purpose of Disbursement fundraising expense | Category/Type 001 | |
| Candidate Name | Transaction ID : B-S-7662 | |
| 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: | [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Capitol Hill Club | | Date of Disbursement MM / DD / YYYY 09 / 17 / 2014 |
| Mailing Address 300 1st Street SE | | Amount of Each Disbursement this Period 67.5 |
| City Washington | State DC | Zip Code 20003-1801 |
| Purpose of Disbursement meeting expense | Category/Type 001 | |
| Candidate Name | Transaction ID : B-S-7657 | |
| 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: | [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Deschutes Brewery | | Date of Disbursement MM / DD / YYYY 08 / 21 / 2014 |
| Mailing Address 901 SW Simpson Avenue | | Amount of Each Disbursement this Period 16 |
| City Bend | State OR | Zip Code 97702-3118 |
| Purpose of Disbursement meeting expense | Category/Type 001 | |
| Candidate Name | Transaction ID : B-S-7660 | |
| 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: | [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 319 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Taste Catering | | Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014 |
| Mailing Address 3516 Valley Drive | | Amount of Each Disbursement this Period 4156.53 |
| City Alexandria | State VA | |
| Zip Code 22302-2131 | Purpose of Disbursement catering | Transaction ID : B-S-7647 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Ruth's Chris Steak House | | Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014 |
| Mailing Address 724 9th Street NW | | Amount of Each Disbursement this Period 3301.07 |
| City Washington | State DC | |
| Zip Code 20001-4505 | Purpose of Disbursement catering | Transaction ID : B-S-7650 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. Staples | | Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014 |
| Mailing Address 460 Mount Hood Street | | Amount of Each Disbursement this Period 407.03 |
| City The Dalles | State OR | |
| Zip Code 97058-3554 | Purpose of Disbursement office supplies | Transaction ID : B-S-7672 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) |
| State: District: | | |

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|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 320 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Tetherow | | Date of Disbursement MM / DD / YYYY 08 / 04 / 2014 |
| Mailing Address 61240 Skyline Ranch Road | | Amount of Each Disbursement this Period 9668 |
| City Bend | State OR Zip Code 97702-3539 | |
| Purpose of Disbursement fundraising expense | Category/Type 001 | Transaction ID : B-S-7664 [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) |
| 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. Verve Media Group | | Date of Disbursement MM / DD / YYYY 09 / 18 / 2014 |
| Mailing Address 925 University Avenue Suite V | | Amount of Each Disbursement this Period 15.02 |
| City Sacramento | State CA Zip Code 95825-6709 | |
| Purpose of Disbursement email service | Category/Type 001 | Transaction ID : B-S-7669 [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) |
| 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. Rackspace | | Date of Disbursement MM / DD / YYYY 09 / 02 / 2014 |
| Mailing Address 9725 Datapoint Drive Suite 100 | | Amount of Each Disbursement this Period 147 |
| City San Antonio | State TX Zip Code 78229 | |
| Purpose of Disbursement email service | Category/Type 001 | Transaction ID : B-S-7643 [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) |
| 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: | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 321 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

A. DC Parking

Full Name (Last, First, Middle Initial)

Mailing Address 949 Constitution Ave

City Washington State DC Zip Code 20003

Purpose of Disbursement travel expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 09 / 18 / 2014

Amount of Each Disbursement this Period 5.5

Transaction ID : B-S-7658

[MEMO ITEM]
Subitemization of Chase Card Services(09/26/14)

B. Hampton Inn - Portland Airport

Full Name (Last, First, Middle Initial)

Mailing Address 8633 NE Airport Way

City Portland State OR Zip Code 97220-1381

Purpose of Disbursement travel expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 09 / 12 / 2014

Amount of Each Disbursement this Period 241.33

Transaction ID : B-S-7668

[MEMO ITEM]
Subitemization of Chase Card Services(09/26/14)

C. Amazon.com

Full Name (Last, First, Middle Initial)

Mailing Address 1516 2nd Ave

City Seattle State WA Zip Code 98144

Purpose of Disbursement fundraising expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 09 / 05 / 2014

Amount of Each Disbursement this Period 53.96

Transaction ID : B-S-7644

[MEMO ITEM]
Subitemization of Chase Card Services(09/26/14)

SUBTOTAL of Disbursements This Page (optional)..... 0.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 322 OF 330 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Amazon.com | | Date of Disbursement MM / DD / YYYY 08 / 22 / 2014 |
| Mailing Address 1516 2nd Ave | | Amount of Each Disbursement this Period 000,000.00 166.88 |
| City Seattle | State WA | |
| Zip Code 98144 | Purpose of Disbursement fundraising expenses | Transaction ID : B-S-7641 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. China Gorge Restaurant | | Date of Disbursement MM / DD / YYYY 08 / 21 / 2014 |
| Mailing Address 2680 Old Columbia River Drive | | Amount of Each Disbursement this Period 000,000.00 12 |
| City Hood River | State OR | |
| Zip Code 97031-9523 | Purpose of Disbursement meeting expense | Transaction ID : B-S-7671 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Pro Line Embroidery | | Date of Disbursement MM / DD / YYYY 09 / 15 / 2014 |
| Mailing Address 5518 Port Royal Road | | Amount of Each Disbursement this Period 000,000.00 3800.1 |
| City Springfield | State VA | |
| Zip Code 22151-2303 | Purpose of Disbursement logo t-shirts | Transaction ID : B-S-7649 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) |
| State: District: | | |

| | |
|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 323 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Colene Clemens Vineyard | | Date of Disbursement MM / DD / YYYY 09 / 13 / 2014 |
| Mailing Address 22501 NE Dopp Road | | Amount of Each Disbursement this Period 292 |
| City Newberg | State OR | |
| Zip Code 97132-7276 | Purpose of Disbursement fundraising expense | Transaction ID : B-S-7659 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Koji Osakaya Restaurant | | Date of Disbursement MM / DD / YYYY 09 / 12 / 2014 |
| Mailing Address 606 SW Broadway | | Amount of Each Disbursement this Period 32 |
| City Portland | State OR | |
| Zip Code 97205-3401 | Purpose of Disbursement travel expense | Transaction ID : B-S-7655 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Secretary of State | | Date of Disbursement MM / DD / YYYY 08 / 22 / 2014 |
| Mailing Address 141 State Capitol | | Amount of Each Disbursement this Period 2500 |
| City Salem | State OR | |
| Zip Code 97310 | Purpose of Disbursement voters pamphlet fee | Transaction ID : B-S-7670 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) |
| State: District: | | |

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|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|--|---|--|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 324 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a | <input type="checkbox"/> 18 <input type="checkbox"/> 20b | <input type="checkbox"/> 19a <input type="checkbox"/> 20c | <input type="checkbox"/> 19b <input type="checkbox"/> 21 | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. US Postal Service | | Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014 |
| Mailing Address 408 Cascade Avenue | | Amount of Each Disbursement this Period 989.09 |
| City Hood River | State OR | |
| Zip Code 97031-7031 | Purpose of Disbursement postage | Transaction ID : B-S-7675 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Uber Technologies | | Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014 |
| Mailing Address 182 Howard Street Unit 8 | | Amount of Each Disbursement this Period 24.37 |
| City San Francisco | State CA | |
| Zip Code 94105-1611 | Purpose of Disbursement travel expense | Transaction ID : B-S-7654 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Uber Technologies | | Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014 |
| Mailing Address 182 Howard Street Unit 8 | | Amount of Each Disbursement this Period 26.23 |
| City San Francisco | State CA | |
| Zip Code 94105-1611 | Purpose of Disbursement travel expense | Transaction ID : B-S-7656 |
| Candidate Name | 001 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) | [MEMO ITEM] Subitemization of Chase Card Services(09/26/14) |
| State: District: | | |

| | |
|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|-----------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 325 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | | | | |
|---|--|--------------------------|---|--|--|
| Full Name (Last, First, Middle Initial) A. Piryx | | | Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2014 | | |
| Mailing Address 144 2nd Street | | | Amount of Each Disbursement this Period 99.2 | | |
| City San Francisco | State CA | Zip Code 94105-3716 | Transaction ID : B-E-45060 | | |
| Purpose of Disbursement credit card processing fee | | Category/ Type 001 | | | |
| 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. Columbia Bank | | | Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014 | | |
| Mailing Address PO Box 980 | | | Amount of Each Disbursement this Period 10 | | |
| City Hood River | State OR | Zip Code 97031-0032 | Transaction ID : B-E-45045 | | |
| Purpose of Disbursement bank fee | | Category/ Type 001 | | | |
| 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. Intuit - QuickBooks | | | Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014 | | |
| Mailing Address 6200 Greenwich Drive | | | Amount of Each Disbursement this Period 108 | | |
| City San Diego | State CA | Zip Code 92122 | Transaction ID : B-E-44978 | | |
| Purpose of Disbursement service fee | | Category/ Type 001 | | | |
| 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)..... | 217.20 |
| 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 326 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 178.28 Transaction ID : B-E-45061 |
| City San Francisco | State CA Zip Code 94105-3716 | |
| Purpose of Disbursement credit card processing fee | Category/Type 001 | |
| 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. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 1.44 Transaction ID : B-E-45064 |
| City San Francisco | State CA Zip Code 94105-3716 | |
| Purpose of Disbursement credit card processing fee | Category/Type 001 | |
| 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. Columbia Bank | | Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014 |
| Mailing Address PO Box 980 | | Amount of Each Disbursement this Period 55.95 Transaction ID : B-E-45166 |
| City Hood River | State OR Zip Code 97031-0032 | |
| Purpose of Disbursement bank fee | Category/Type 001 | |
| 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)..... | 235.67 |
| 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 327 OF 330 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 425.94 Transaction ID : B-E-45062 |
| City San Francisco | State CA | |
| Zip Code 94105-3716 | Purpose of Disbursement credit card processing fee | Category/ Type 001 |
| 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. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 81.97 Transaction ID : B-E-45063 |
| City San Francisco | State CA | |
| Zip Code 94105-3716 | Purpose of Disbursement credit card processing fee | Category/ Type 001 |
| 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. Piryx | | Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014 |
| Mailing Address 144 2nd Street | | Amount of Each Disbursement this Period 57.5 Transaction ID : B-E-45065 |
| City San Francisco | State CA | |
| Zip Code 94105-3716 | Purpose of Disbursement credit card processing fee | Category/ Type 001 |
| 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)..... | 565.41 |
| TOTAL This Period (last page this line number only)..... | 318930.68 |

**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 328 OF 330 | | | |
| | <input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Cantor for Congress | | Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014 |
| Mailing Address PO Box 17813 | | Amount of Each Disbursement this Period 2000 Transaction ID : B-E-44913 |
| City Richmond | State VA Zip Code 23226-7813 | |
| Purpose of Disbursement 2014 primary debt retirement contribution | | Category/ Type 011 |
| Candidate Name Eric I. Cantor | | |
| Office Sought: <input checked="" type="checkbox"/> House | Disbursement For: 2014 | |
| <input type="checkbox"/> Senate | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | |
| <input type="checkbox"/> President | <input type="checkbox"/> Other (specify) | |
| State: VA | District: 07 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Chuck Thomsen | | Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2014 |
| Mailing Address 1595 Eastside Road | | Amount of Each Disbursement this Period 225.02 Transaction ID : B-I-45175 |
| City Hood River | State OR Zip Code 97031-9561 | |
| Purpose of Disbursement fundraising event staff time, printing, postage | | Category/ Type 011 |
| Candidate Name Charles Thomsen | | |
| Office Sought: <input type="checkbox"/> House | Disbursement For: 2014 | |
| <input type="checkbox"/> Senate | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | |
| <input type="checkbox"/> President | <input type="checkbox"/> Other (specify) | |
| State: | District: | |

[MEMO ITEM]
Inkind Donation Made(For State/Local Candidate Support)

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. Friends of Mark Johnson | | Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2014 |
| Mailing Address 3370 Fir Mountain Road | | Amount of Each Disbursement this Period 225.02 Transaction ID : B-I-45176 |
| City Hood River | State OR Zip Code 97031-8401 | |
| Purpose of Disbursement fundraising event: staff time, printing & postage | | Category/ Type 011 |
| Candidate Name Mark Johnson | | |
| Office Sought: <input type="checkbox"/> House | Disbursement For: 2014 | |
| <input type="checkbox"/> Senate | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | |
| <input type="checkbox"/> President | <input type="checkbox"/> Other (specify) | |
| State: | District: | |

[MEMO ITEM]
Inkind Donation Made(For State/Local Candidate Support)

| | |
|---|---------|
| 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 329 OF 330 | | | |
| | <input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Josephine County Republican Central Committee | | Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address 1867 Williams Highway | | Amount of Each Disbursement this Period 900 Transaction ID : B-E-44888 |
| City Grants Pass State OR Zip Code 97527-5854 | Purpose of Disbursement contribution 011 Category/Type | |
| Candidate Name Josephine County Republican Central Committee | 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 Other (specify) | |
| State: District: | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Wasco County Republican Central Committee | | Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014 |
| Mailing Address PO Box 688 | | Amount of Each Disbursement this Period 20 Transaction ID : B-E-44889 |
| City The Dalles State OR Zip Code 97058-0688 | Purpose of Disbursement event ticket 011 Category/Type | |
| Candidate Name Wasco County Republican Central Committee | 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 Other (specify) | |
| State: District: | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. Citizens to Elect Dennis Richardson | | Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2014 |
| Mailing Address 10725 SW Barbur Boulevard Suite 230 | | Amount of Each Disbursement this Period 1361.7 Transaction ID : B-I-45177 |
| City Portland State OR Zip Code 97219-8654 | Purpose of Disbursement travel expense: airfare 011 Category/Type | |
| Candidate Name Dennis Richardson | 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 Other (specify) | [MEMO ITEM] Inkind Donation Made(For State/Local Candidate Support) |
| State: District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 920.00 |
| 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 330 OF 330 | |
| | <input type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input checked="" type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
Walden for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Dr. Monica Wehby for US Senate | | Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2014 |
| Mailing Address PO Box 3375 | | Amount of Each Disbursement this Period 680.85 |
| City Portland | State OR | |
| Zip Code 97208-3375 | Purpose of Disbursement travel expense: airfare | Transaction ID : B-I-45174 |
| Candidate Name Monica Wehby | Category/ Type 011 | |
| Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] Inkind Donation Made |
| State: OR | District: | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Jackson County Republican Central Committee | | Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014 |
| Mailing Address 311 E Main Street | | Amount of Each Disbursement this Period 3000 |
| City Medford | State OR | |
| Zip Code 97501-6018 | Purpose of Disbursement contribution | Transaction ID : B-E-44721 |
| Candidate Name Jackson County Republican Central Committee | Category/ Type 011 | |
| 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. | | 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)..... | 3000.00 |
| TOTAL This Period (last page this line number only)..... | 5920.00 |