PAGE 1 / 21

Image# 12972487696

FEC FORM 3

FE5AN018

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	An Authorized	Committee	Offic	ce Use Only
NAME OF TYPE OR F COMMITTEE (in full)	PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
Thompson for Congress				1
<u> </u>				
. 00454 To				
ADDRESS (number and street)	mas 			
Check if different				
than previously reported. (ACC)	Sta Margarita		CA 9268	8
2. FEC IDENTIFICATION NUMBER ▼	CIT	Y	STATE	ZIP CODE A STATE ▼ DISTRICT
C C00514695	3. IS TH REPO		AMENDED (A)	OR 05
4. TYPE OF REPORT (Choose One)				
(a) Quarterly Reports:	(b) 12-Da	y PRE -Election Report for the):	
		Primary (12P)	General (12G)	Runoff (12R)
April 15 Quarterly Report (Q1)		Convention (12C)	Special (12S)	
July 15 Quarterly Report (Q2)				
X October 15 Quarterly Report (Q	3) Electi	ion on	/ Y Y Y Y	in the State of
January 31 Year-End Report (Ye	(c) 30-Da	y POST-Election Report for the	ne:	
		General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Electi	ion on	/ Y Y Y Y Y	in the State of
5. Covering Period 07 01	7 Y Y Y Y Y 2012	through 0	9 / D D / Y 30	Y Y Y 2012
I certify that I have examined this Report ar	nd to the best of	my knowledge and belief it is	s true, correct and cor	mplete.
Type or Print Name of Treasurer Betty Pre	esley			
Signature of Treasurer Betty Presley		[Electronically Filed]	Date 10 /	04 / 2012
NOTE: Submission of false, erroneous, or inco	mplete information	n may subject the person signir	ng this Report to the pe	enalties of 2 U.S.C. §437g.
Office Use Only				FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 21

Write or Type Committee Name

Thompson for Congress

09 30 2012 01 2012 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 12628.24 20632.36 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 12628.24 20632.36 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 9551.97 17023.70 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 9551.97 17023.70 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 3612.90 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 3936.31 Schedule C and/or Schedule D).....

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 21

Write or Type Committee Name

Thompson for Congress

Report Covering the Period: From: 07 01 2012 To: 09 30 2012

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
1. (CONTRIBUTIONS (other than loans) FROM:		
(;	a) Individuals/Persons Other Than		
	Political Committees (i) Itemized (use Schedule A)	9900.00	16300.00
	(ii) Unitemized	2718.24	4222.36
	(iii) TOTAL of contributions from individuals	12618.24	20522.36
(1	b) Political Party Committees	0.00	0.00
(0	c) Other Political Committees (such as PACs)	0.00	0.00
` `	d) The Candidate	10.00	110.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	12628.24	20632.36
	TRANSFERS FROM OTHER	0.00	0.00
3. L	OANS:		
(;	a) Made or Guaranteed by the Candidate	0.00	0.00
(1	b) All Other Loans	0.00	0.00
(0	c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
	DFFSETS TO OPERATING		
	EXPENDITURES Refunds, Rebates, etc.)	0.00	0.00
	OTHER RECEIPTS Dividends, Interest, etc.)	0.00	4.24
1	TOTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	12628.24	20636.60

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 21

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	9551.97	17023.70
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
		0.00	0.00
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	9551.97	17023.70
	III. CASH SU	IMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	536.63
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	12628.24
25.	SUBTOTAL (add Line 23 and Line 24)		13164.87
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	9551.97
27.	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	3612.90

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: **PAGE** 5 OF 21 (check only one) 11a 11d 11b 11c 12 13a 13b

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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) Thompson for Congress Full Name (Last, First, Middle Initial) Don Bybee Date of Receipt Mailing Address 3393 Acorn Ln S 2012 17 City State Zip Code **Transaction ID: INCA274** OR 97302 Salem FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation **Dover Management Inc** President Receipt For: 2012 Election Cycle-to-Date Primary X General 450.00 Other (specify) Full Name (Last, First, Middle Initial) Larry E. Tokarski Date of Receipt Mailing Address 201 Ferry St SE, #400 17 2012 City State Zip Code **Transaction ID: INCA273** Salem OR 97301 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation CEO Mountain West Investment Corp Receipt For: 2012 Election Cycle-to-Date Primary ✓ General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Diane E. Fritz Date of Receipt Mailing Address 10115 Parrish Gap Rd 2012 24 City State Zip Code **Transaction ID: INCA276** OR 97392 Turner FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 50.00 Name of Employer Occupation Diane E. Fritz, CPA CPA Receipt For: 2012 Election Cycle-to-Date Primary General 500.00 Other (specify) 1300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER:				PAGE		6	OF		21	
(check only one)										
×	11a		11b		11c		11	d		
	12		13a		13b		14			15

	and Statements may not be sold or used by any p ng the name and address of any political committed					
NAME OF COMMITTEE (In Full) Thompson for Congress						
Full Name (Last, First, Middle Initial) Diana Powers Evans						
Mailing Address 1910 Madrona Ave S		Date of Receipt				
City	00.1					
City Salem	State Zip Code OR 97302	Transaction ID : INCA279				
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period				
Name of Employer None	Occupation Retired	100.00				
Receipt For: 2012 Primary Signal General Other (specify)	Election Cycle-to-Date					
Full Name (Last, First, Middle Initial) B. David Campbell	,	Date of Receipt				
Mailing Address 38342 S Sawtell Rd	Mailing Address 38342 S Sawtell Rd					
City Molalla	Transaction ID : INCA294					
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period					
Name of Employer	Occupation	250.00				
None	Retired					
Receipt For: 2012 Primary General Other (specify)	Election Cycle-to-Date					
Full Name (Last, First, Middle Initial) Diane E. Fritz		Date of Receipt				
Mailing Address 10115 Parrish Gap Rd		08 14 2012				
City Turner	State Zip Code OR 97392	Transaction ID : INCA293				
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period				
Name of Employer	Occupation	50.00				
Diane E. Fritz, CPA	СРА					
	Receipt For: 2012 Election Cycle-to-Date					
Primary X General Other (specify)	500.00					
SUBTOTAL of Receipts This Page (optional	al)	400.00				

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 7 OF 21 (check only one) 11a 11b 11d 11c 12 13a 13b

Use separate schedule(s) for each category of the Detailed Summary Page 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) Thompson for Congress Full Name (Last, First, Middle Initial) **Grant Newton** Date of Receipt Mailing Address 4766 Andrews Rd 2012 01 City State Zip Code Transaction ID: INCA312 OR 97541 Medford FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 2500.00 Name of Employer Occupation **AIRA Executive Director** Receipt For: 2012 Election Cycle-to-Date Primary X General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) Carl Sanders Date of Receipt Mailing Address 5494 Salal St SE 05 2012 City State Zip Code Transaction ID: INCA314 Salem OR 97306 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2500.00 Name of Employer Occupation **Director of Development** JER Senior Living Receipt For: 2012 Election Cycle-to-Date ✓ General Primary 2500.00 Other (specify) Full Name (Last, First, Middle Initial) Libby Sanders Date of Receipt Mailing Address 5494 Salal St 2012 05 City State Zip Code **Transaction ID: INCA315** OR Salem 97306 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2500.00 Name of Employer Occupation None Homemaker Receipt For: 2012 Election Cycle-to-Date General Primary 2500.00 Other (specify) 7500.00 SUBTOTAL of Receipts This Page (optional).....

SCHEDULE A (FEC Form 3)

Use separate schedule(s)

FOR LINE NUMBER:				PAGE	:	8 ()⊦	21
(check only one)								
	X _{11a}	11b		11c		11d		_
	12	13a		13b		14		15

for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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) Thompson for Congress Full Name (Last, First, Middle Initial) William Rose Date of Receipt Mailing Address 584 Dune Oaks 09 2012 17 City State Zip Code Transaction ID : INCA330 SC 29440 Georgetown FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 200.00 Name of Employer Occupation None Retired Receipt For: 2012 Election Cycle-to-Date Primary X General 400.00 Other (specify) Full Name (Last, First, Middle Initial) Vickey Jurgens Date of Receipt Mailing Address 12455 NW Skyline Blvd 09 25 2012 City State Zip Code **Transaction ID: INCA352** Portland OR 97231 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 300.00 Name of Employer Occupation Retired None Receipt For: 2012 Election Cycle-to-Date ✓ General Primary 300.00 Other (specify) Full Name (Last, First, Middle Initial) C.

, Gordon Kelly		Date of Receipt
Mailing Address 840 Sahalee Ct SE		09 25 2012
City Salem	State Zip Code OR 97306	Transaction ID : INCA355
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	200.00
None	Retired	,
Receipt For: 2012	Election Cycle-to-Date	
Primary General Other (specify)	200.00	
SUBTOTAL of Receipts This Page (optional	al)	700.00

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

9900.00

36	CHEDULE A (FEC Form 3)		Han apparete select total	FOR LINE NUMBER: PAGE 9 OF 21
TEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check only one)
	EMIZED RECEIPTS		Detailed Summary Page	11a 11b 11c X 11d 12 13a 13b 14 15
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) Thompson for Congress			
	Full Name (Last, First, Middle Initial)			
١.	Fred Thompson			Date of Receipt
	Mailing Address 4554 12th Avenue South			07 27 2012
	City	State	Zip Code	Transaction ID : PAYA338
	Salem	OR	97302	Transaction in . I A 1 A 330
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	100.00
	New York Life Insurance Co	Insurance A	<u> </u>	Buttons
	Receipt For: 2012 Primary General	Election C	ycle-to-Date	[MEMO ITEM]
	Other (specify)		2646.31	
	Full Name (Last, First, Middle Initial) Fred Thompson			Date of Receipt
٠.	Mailing Address 4554 12th Avenue South	07 31 2012		
	City	State	Zip Code	Transaction ID : PAYA288
	Salem	OR	97302	Transaction is TTYTT/1200
	FEC ID number of contributing	С		Amount of Each Receipt this Period
	federal political committee.	U		1947.06
	Name of Employer	Occupation		1847.06
	New York Life Insurance Co Receipt For: 2012	Insurance A	<u>-</u>	Yard Signs
	Primary General	Election C	ycle-to-Date	[MEMO ITEM]
	Other (specify)		2646.31	
_	Full Name (Last, First, Middle Initial)			Data of Descirt
).	Fred Thompson Mailing Address 4554 12th Avenue South			Date of Receipt
	4554 12th Avenue South			08 04 2012
	City	State OR	Zip Code	Transaction ID : INCA284
	Salem	UK	97302	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation		10.00
	New York Life Insurance Co Receipt For: 2012	Insurance /		_
	Primary General	⊏iection C	ycle-to-Date	
	Other (specify)		2646.31	
_	UBTOTAL of Receipts This Page (optional)			10.00
9	or receipte this rage (optional)			, , , , , , , , , , , , , , , , , , , ,

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 OF 21 (check only one) 11a 11b 11c X 11d 12 13a 13b 14 15
				person for the purpose of soliciting contributions be to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Thompson for Congress			
<u></u>	Full Name (Last, First, Middle Initial)			
A.	Fred Thompson			Date of Receipt
	Mailing Address 4554 12th Avenue South			M M / D D / Y Y Y Y
	City	State	Zip Code	08 13 2012
	Salem	OR	97302	Transaction ID : PAYA299
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	8.30
	New York Life Insurance Co	Insurance A	Agent	Printing Costs
	Receipt For: 2012 Primary General Other (specify)	Election C	ycle-to-Date 2646.31	[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) Fred Thompson			Date of Receipt
D.	Mailing Address 4554 12th Avenue South	09 11 2012		
	City Salem	State OR	Zip Code 97302	Transaction ID : PAYA342
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	185.00
	New York Life Insurance Co	Insurance A	Agent	Print Ad
	Receipt For: 2012 Primary General Other (specify)	Election C	ycle-to-Date 2646.31	[MEMO ITEM]
_	Full Name (Last, First, Middle Initial)			
C.				Date of Receipt
	Mailing Address			M M / D D / Y Y Y Y
City Sta			Zip Code	
FEC ID number of contributing federal political committee.		С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify)	Election C	ycle-to-Date	
s	UBTOTAL of Receipts This Page (optional)			0.00

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

10.00

	CHEDULE B (I EMIZED DISBU		-	Use separate sch for each category Detailed Summar	nedule(s) / of the	FOR LINE NUMBER: PAGE 11 OF 21 (check only one) X 17
						erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTE Thompson for	EE (In Full)				
Α.	Full Name (Last, First, Voter Connection	,				Date of Disbursement
	Mailing Address 2131	Capitol Ave, #30	6			07 12 2012
	City Sacramento		State CA	Zip Code 95816		Amount of Each Disbursement this Period
	Purpose of Disbursem Credit Card Processin	nent ng Fees			001	2.95 Transaction ID : EXPB269
	Candidate Name				Category/ Type	
	Office Sought:	House Senate President	Disbursement For Primary Other (s	X General		
_	State: Dis: Full Name (Last, First,	trict: Middle Initial)				
В.	3AM Communi Mailing Address 1821	ications				Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City		State	Zip Code		Amount of Each Disbursement this Period
	Stockton		CA	95204		
	Purpose of Disbursem Website Costs Candidate Name	lent			001	750.00 Transaction ID : EXPB270
	Candidate Name				Category/ Type	
	Office Sought:	House Senate President	Disbursement For Primary Other (s	X General		
		trict:				
C.	Full Name (Last, First, Bank of Americ	*				Date of Disbursement
	Mailing Address 3153	31 Santa Margarita	a Pkwy			07 19 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City PachoStoMorgarita			p Code		Amount of Each Disbursement this Period
RnchoStaMargarita CA 92688 Purpose of Disbursement Check Printing				2000	001	24.00
	Candidate Name				Category/ Type	Transaction ID : EXPB292
	Office Sought:	House Senate President	Disbursement For Primary Other (s	X General		
_	State: Dis	trict:				
						776.95

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

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	nedule(s) (c of the	OR LINE NUMBER: PAGE 12 OF 21 check only one) X 17
Any information copied from such Reports and State or for commercial purposes, other than using the national NAME OF COMMITTEE (In Full) Thompson for Congress			
RnchoStaMargarita Purpose of Disbursement Bank Fee Candidate Name	State Zip Code CA 92688 nent For: 2012 Primary General Other (specify)	001 Category/ Type	Date of Disbursement O7 31 2012 Amount of Each Disbursement this Period 29.95 Transaction ID: EXPB291
Betty Presley & Associates, Inc. Mailing Address 31051 Tomas City RachStaMargarita Purpose of Disbursement Financial Analyst Candidate Name Office Sought: House Senate	State Zip Code CA 92688 nent For: 2012 Primary X General	001 Category/ Type	Date of Disbursement M M / D D / Y Y Y Y Amount of Each Disbursement this Period 1400.00 Transaction ID: EXPB280
State: District: Full Name (Last, First, Middle Initial) Fred Thompson Mailing Address 4554 12th Avenue South City State Salem OR Purpose of Disbursement Banner Costs Candidate Name	Zip Code 97302 ment For: 2012 Primary General Other (specify)	001 Category/ Type	Date of Disbursement M M / D D / Y Y Y Y O7 31 2012 Amount of Each Disbursement this Period 90.00 Transaction ID: EXPB282
State: District:			1510.05

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

-							
SCHEDULE B (FEC Form 3)	Use separate sch	edule(s) (FOR LINE NUMBER: PAGE 13 OF 21 (check only one)				
ITEMIZED DISBURSEMENTS	for each category Detailed Summary		X 17 18 19a 19b 20a 20b 20c 21				
Any information copied from such Reports and Statemen or for commercial purposes, other than using the name a			erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)							
Thompson for Congress							
Full Name (Last, First, Middle Initial)							
A. Voter Connections	Voter Connections						
Mailing Address 2131 Capitol Ave, #306			08				
City State	e Zip Code		Amount of Fook Dishursement this Deviced				
Sacramento CA	95816		Amount of Each Disbursement this Period				
Purpose of Disbursement			20.50				
Credit Card Processing Fees		001	Transaction ID : EXPB297				
Candidate Name		Category/ Type					
Office Sought: House Disbursement							
	nary X General						
	er (specify)						
State: District: Full Name (Last, First, Middle Initial)							
PagaMarka Craphia Dagian			Date of Disbursement				
B. Pageworks Graphic Design							
Mailing Address PO Box 5984	08						
City State	e Zip Code		Amount of Each Disbursement this Period				
Salem OR	97304		7 through of Each Blobal controls the Follow				
Purpose of Disbursement Design & Printing		Tani I	425.00				
		001	Transaction ID : EXPB304				
Candidate Name		Category/ Type					
Office Sought: House Disbursement	For: 2012	туре	_				
Senate Prin							
	er (specify)						
State: District:							
Full Name (Last, First, Middle Initial)							
c. Voter Connections			Date of Disbursement				
Mailing Address 2131 Capitol Ave, #306			08 23 2012				
City State	Zip Code		Amount of Each Disbursement this Period				
Purpose of Disbursement Credit Card Processing Fees		001	4.00				
Candidate Name							
Office County 11	- Faw. 2012	Туре	_				
Office Sought: House Disbursement							
	nary X General er (specify)						
State: District:	o. (apoony)						

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

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

449.50

	CHEDULE B (FEC Form 3 EMIZED DISBURSEMENTS	-	Use separate sch for each category Detailed Summar	nedule(s) of the	FOR LINE NUMBER: PAGE 14 OF 21 (check only one) X 17
					erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Thompson for Congress				
Α.	Full Name (Last, First, Middle Initial) Voter Connections				Date of Disbursement
	Mailing Address 2131 Capitol Ave, #306				08 28 2012
	City Sacramento	State CA	Zip Code 95816		Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees			001	1.20 Transaction ID : EXPB313
	Candidate Name			Category/ Type	Transaction 12 / 2/1 30 / 0
	Office Sought: House Senate President	Disbursement For Primary Other (s	X General		
_	State: District: Full Name (Last, First, Middle Initial)				
В.	Pank of America			Date of Disbursement OR DESCRIPTION OF THE PROPERTY OF THE P	
	City	State	Zip Code		Amount of Each Disbursement this Period
	RnchoStaMargarita CA 92688			16.00	
	Purpose of Disbursement Bank Fee			001	Transaction ID : EXPB325
	Candidate Name			Category/ Type	
	Office Sought: House Senate President	Disbursement For Primary Other (s	Marcal General		
	State: District:		,		
c.	Full Name (Last, First, Middle Initial) Voter Connections				Date of Disbursement
	Mailing Address 2131 Capitol Ave, #306			09	
	City State Zip Code Sacramento CA 95816				Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Processing Fees 001			534.50	
	Candidate Name			Category/ Type	Transaction ID : EXPB324
	Office Sought: House Senate President	Disbursement For Primary Other (s	X General		
_	State: District:				
					551.70

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

SCHEDULE B	-	-	Use separate sch for each category Detailed Summar	nedule(s) of the	FOR LINE NUMBER: PAGE 15 OF 21 (check only one) X 17	
					erson for the purpose of soliciting contributions e to solicit contributions from such committee.	
NAME OF COMMITT Thompson for	, ,					
Full Name (Last, Firs	tions				Date of Disbursement 09 13 2012	
Mailing Address 213 City Sacramento	1 Capitol Ave, #306	State CA	Zip Code 95816		Amount of Each Disbursement this Period	
Purpose of Disburse Credit Card Process	ment ing Fees			001	7.10 Transaction ID : EXPB339	
Candidate Name Office Sought:	House	Disbursement For	. 2012	Category/ Type		
	Senate President	Primary Other (s	X General			
Full Name (Last, Firs Betty Presley Mailing Address 310	t, Middle Initial) & Associates	, Inc.			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City RachStaMargarita		State CA	Zip Code 92688		Amount of Each Disbursement this Period	
	Purpose of Disbursement Financial Analyst Condidate Name			001 Category/ Type	1400.00 Transaction ID : EXPB337	
Office Sought:	House Senate President	Disbursement For Primary Other (s	Marcal General	турс		
State: Di Full Name (Last, Firs C. Betty Presley Mailing Address 310	& Associates	Inc.			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City RachStaMargarita	City State Zip Code				Amount of Each Disbursement this Period	
	Purpose of Disbursement Financial Analyst Candidate Name Cate			001 Category/ Type	1400.00 Transaction ID : EXPB335	
Office Sought:	House Senate President	Disbursement For Primary Other (s	X General	31 1. *		
State: Di	strict:				2807.10	

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

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sched for each category of Detailed Summary	dule(s) (d	OR LINE NUMBER: PAGE 16 OF 21 check only one) X 17
	y information copied from such Reports and Statements r for commercial purposes, other than using the name and			
\rangle	NAME OF COMMITTEE (In Full) Thompson for Congress			
۸.	Full Name (Last, First, Middle Initial) Lynn Howlett Photography Mailing Address 2033 25th Street SE City Salem OR Purpose of Disbursement Photo Services Candidate Name Office Sought: House Senate Disbursement Primary		001 Category/ Type	Date of Disbursement 09 17 2012 Amount of Each Disbursement this Period 200.00 Transaction ID: EXPB334
3.	State: District: Full Name (Last, First, Middle Initial) GameDay Media Mailing Address PO Box 2269 City State Lake Osewego OR Purpose of Disbursement	Zip Code 97035		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Print Ad Candidate Name Office Sought: House Disbursement Formary Senate Primary Other (State: District:		001 Category/ Type	Transaction ID : EXPB343
).	Full Name (Last, First, Middle Initial) 3AM Communications Mailing Address 1821 Concord Ave			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Stockton CA Purpose of Disbursement Website Costs Candidate Name Office Sought: House Disbursement Formany Senate Primary Other (001 Category/ Type	Amount of Each Disbursement this Period 750.00 Transaction ID : EXPB358
	State: District:			4077.00
s	UBTOTAL of Disbursements This Page (optional)			1275.00

	CHEDULE B (FEC I EMIZED DISBURSE	-	Use separate sch for each category Detailed Summar	nedule(s) y of the	FOR LINE NUMBER: PAGE 17 OF 21 (check only one) X 17
					erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Fu Thompson for Congr	,			
<u></u>	Full Name (Last, First, Middle	Initial)			
A.	Dane & Associates				Date of Disbursement
	Mailing Address 4145 Pequer	no Avenue			09 20 2012
	City Las Vegas	State NV	Zip Code 89120		Amount of Each Disbursement this Period
	Purpose of Disbursement Polling Costs		00120	001	1500.07
	Candidate Name			Category/ Type	Transaction ID : EXPB344
	Office Sought: House Senate Preside	e Primary	X General	.,,,,,	
_	State: District:	1-11-0			
В.	Full Name (Last, First, Middle Initial) PageWorks Graphic Design Mailing Address PO Box 5984			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code		Amount of Each Disbursement this Period
	Salem OR 97304 Purpose of Disbursement			607.00	
	Design & Printing Costs			001	Transaction ID : EXPB345
	Candidate Name			Category/ Type	Halisaction ID . EAP 5345
	Office Sought: House Senate Preside	Primary	Marcal General		
	State: District:				
c.	Full Name (Last, First, Middle Voter Connections	Initial)			Date of Disbursement
	Mailing Address 2131 Capitol Ave, #306			09 / D D / Y Y Y Y Y Z Z Z Z Z Z Z Z Z Z Z Z Z Z	
	City State Zip Code				Amount of Each Disbursement this Period
	Sacramento CA 95816 Purpose of Disbursement				17.95
	Credit Card Processing Fees 001			001	
	Candidate Name			Category/ Type	Transaction ID : EXPB346
	Office Sought: House Senate Preside	Primary	X General		
	State: District:		· •,		
					2125.02

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		Use separate so for each categor Detailed Summon	ry of the	FOR LINE NUMBER: (check only one) X 17	
	ny information copied from such Reports and Stateme for commercial purposes, other than using the name				
	NAME OF COMMITTEE (In Full) Thompson for Congress				
Α.	Full Name (Last, First, Middle Initial) Bank of America			Date of Disbursement	
	Mailing Address 31531 Santa Margarita Pkwy			09 21 2012	
	City Star RnchoStaMargarita CA	te Zip Code 92688		Amount of Each Disbursement this Period	
	Purpose of Disbursement Bank Fee		001	10.00 Transaction ID : EXPB365	
	Candidate Name		Category/ Type	Transaction is . Ext 5505	
	Senate	nt For: 2012 mary X General her (specify)	71		
	State: District:				
В.	Full Name (Last, First, Middle Initial) Voter Connections Mailing Address 2131 Capitol Ave, #306			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State Zip Code			Amount of Each Disbursement this Period	
	Sacramento	95816		Amount of Each Dispursement this Period	
	Purpose of Disbursement Credit Card Processing Fees			20.75 Transaction ID : EXPB363	
	Candidate Name	Category/ Type			
	Senate Pri	nt For: 2012 mary X General her (specify)			
	State: District:				
C.	Full Name (Last, First, Middle Initial) Bank of America			Date of Disbursement	
	Mailing Address 31531 Santa Margarita Pkwy			09 28 7 2012	
	City State RnchoStaMargarita CA	Amount of Each Disbursement this Period			
	RnchoStaMargarita CA 92688 Purpose of Disbursement Bank Fee			16.00	
	Candidate Name		001 Category/ Type	Transaction ID : EXPB364	
	Senate Pri	nt For: 2012 imary X General her (specify)			
_	State: District:				
				46.75	

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

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

9551.97

SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

Exc

(Use separate schedule(s) for each

PAGE 19 OF FOR (check

LINE NUMBER:		
k only one)		9
	$\overline{\mathbf{v}}$	10

21

Excluding Loans		numbered line)	 10
NAME OF COMMITTEE (In Full)		<u> </u>	. ,
Thompson for Congre	ess		
A. Full Name (Last, First, Middle Initial) of De	ebtor or Creditor	Nature of De Financial A	ebt (Purpose):
Betty Presley & Associates, In	Betty Presley & Associates, Inc.		
Mailing Address 31051 Tomas			
City State	Zip Code		
RachStaMargarita	CA 92688		
Outstanding Balance Beginning This Period		Transactio	n ID : PAYD268
1400.00			
Assessed Title Decide	December This Decive	O total dis	- Balance of Oleran of This Build
Amount Incurred This Period	Payment This Period	Outstandin	g Balance at Close of This Period
0.00		400.00	0.00
B. Full Name (Last, First, Middle Initial) of Del	otor or Creditor	Nature of De	ebt (Purpose):
Betty Presley & Associates, In-		Financial Ar	
Mailing Address 31051 Tomas			
City State	Zip Code		
RachStaMargarita	CA 92688		
Outstanding Balance Beginning This Period		Transactio	n ID : PAYD366
0.00			
Amount Incurred This Period	Payment This Period	Outstandin	g Balance at Close of This Period
	Tayment This Tened		
1400.00	7 7	0.00	1400.00
C. Full Name (Last, First, Middle Initial) of De	ebtor or Creditor	Nature of De	ebt (Purpose):
Fred Thompson		Travel & Pr	int Ad
Mailing Address 4554 12th Avenue South			
City	State Zip Code		
Salem	OR 97302	Tuamaaati	on ID - DAVDOCO
Outstanding Balance Beginning This Period		Transactio	on ID : PAYD262
395.95			
Amount Incurred This Period	Payment This Period	Outstandin	g Balance at Close of This Period
0.00		0.00	395.95
			,
1) SUPTOTALS This Devied This Dags (entires	n.		1795.95
1) SUBTOTALS This Period This Page (optional	''		7 7 7 7
2) TOTALS This Period (last page this line num	ber only)	<u></u>	
3) TOTAL OUTSTANDING LOANS from Schedu	ule C (last page only)		7
4) ADD 2) and 3) and carry forward to appropr	iate line of Summary Page (last page	e only)	

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 20 OF
FOR LINE NUMBER:
(check only one)

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		9
	X	10

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NAME OF COMMITTEE (I	n Full)	
Thompson	for Con	aress

Thompson for Congres	S	
A. Full Name (Last, First, Middle Initial) of Debtor Fred Thompson	r or Creditor	Nature of Debt (Purpose): Yard Signs
Mailing Address 4554 12th Avenue South		
City State Salem	Zip Code OR 97302	
Outstanding Balance Beginning This Period		Transaction ID : PAYD288
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1847.06	0.	00 1847.06
B. Full Name (Last, First, Middle Initial) of Debtor Fred Thompson	or Creditor	Nature of Debt (Purpose): Printing Costs
Mailing Address 4554 12th Avenue South		
City State Salem	Zip Code OR 97302	
Outstanding Balance Beginning This Period		Transaction ID : PAYD299
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
8.30	0.	00 8.30
C. Full Name (Last, First, Middle Initial) of Debto Fred Thompson	r or Creditor	Nature of Debt (Purpose): Buttons
Mailing Address 4554 12th Avenue South		
City Salem	State Zip Code OR 97302	
Outstanding Balance Beginning This Period		Transaction ID : PAYD338
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
100.00	0.	.00 100.00
1) SUBTOTALS This Period This Page (optional)		1955.36
2) TOTALS This Period (last page this line number	only)	
3) TOTAL OUTSTANDING LOANS from Schedule (C (last page only)	· · · · · · · · · · · · · · · · · · ·
4) ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page or	nly) ►

SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

(Use separate schedule(s) for each numbered line)

FOR (chec

PAGE

LINE NUMBER:		
ck only one)		9
	X	10

21 OF

21

Excluding Loans NAME OF COMMITTEE (In Full) Thompson for Congress Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Print Ad Fred Thompson Mailing Address 4554 12th Avenue South Zip Code City OR Salem 97302 Transaction ID: PAYD342 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 185.00 185.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 185.00 1) SUBTOTALS This Period This Page (optional)..... 3936.31 2) TOTALS This Period (last page this line number only)..... 0.00 TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 3936.31 ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)