10/04/2012 10 : 03

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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An A	Authorized Co	mmittee			Office Use Only
NAME OF COMMITTEE (in full) TYPE OR PRIN	•	Example: If typing over the lines.	g, type	12FE4M5	
Anders for Congress					
	RKET PL #101-20				
ADDRESS (number and street)					
Check if different than previously reported. (ACC)	Л П			WA L	98226
2. FEC IDENTIFICATION NUMBER ▼	CITY ▲		;	STATE A	ZIP CODE A STATE ▼ DISTRICT
C C00496877	3. IS THIS REPORT	NEW (N)	OR	AMEND (A)	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1)	(b) 12-Day PF	RE-Election Repo	-	General (1	2G) Runoff (12R)
July 15 Quarterly Report (Q2)		Convention (2C)	Special (1	
October 15 Quarterly Report (Q3)	Election of	on M M /	D D /	Y Y Y	in the State of
January 31 Year-End Report (YE)	(c) 30-Day P (DST -Election Rep	ort for the:		
		General (30G		Runoff (30	OR) Special (30S)
▼ Termination Report (TER)	Election of	on/	D D /	Y Y Y Y	in the State of
5. Covering Period 07 01	/ Y Y Y Y Y 2012	through	M M M 09	30	Y Y Y Y 2012
I certify that I have examined this Report and t Type or Print Name of Treasurer MARTIN MC	-	knowledge and k	pelief it is tru	ue, correct and	d complete.
		(T)		M M 09	/ D D / Y Y Y Y Y 30 2012 _
Signature of Treasurer MARTIN MOSKOWITZ		[Electronically I	rued] D	ate	
NOTE: Submission of false, erroneous, or incompl	ete information ma	ay subject the per	son signing t	his Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

PAGE 2 / 15

Write or Type Committee Name

09 30 2012 01 2012 Report Covering the Period: From: To: **COLUMN B COLUMN A Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 0.00 182723.47 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 43576.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 139147.47 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 1447.31 133527.73 (from Line 17) (b) Total Offsets to Operating 41.79 41.79 Expenditures (from Line 14)..... (c) Net Operating Expenditures 1405.52 133485.94 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 0.00 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D).....

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

PAGE 3 / 15

2686.14

448051.40

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Anders for Congress

07 2012 09 2012 01 30 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 162310.04 (i) Itemized (use Schedule A)..... 0.00 7234.52 (ii) Unitemized (iii) TOTAL of contributions 0.00 169544.56 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 8178.91 (such as PACs)..... 0.00 5000.00 The Candidate..... TOTAL CONTRIBUTIONS (other than loans) 0.00 182723.47 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 0.00 262600.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 262600.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 41.79 41.79 (Refunds, Rebates, etc.)

35.83

77.62

15. OTHER RECEIPTS

16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15)

(Dividends, Interest, etc.)

(Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

rsements PAGE 4 / 15

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date			
17.	OPERATING EXPENDITURES	1447.31	133527.73			
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00			
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Condidate	52600.00	262600.00			
	by the Candidate	0.00	0.00			
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	52600.00	262600.00			
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees	0.00	43576.00			
	(b) Political Party Committees	0.00	0.00			
	(c) Other Political Committees (such as PACs)	0.00	0.00			
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	43576.00			
21.	OTHER DISBURSEMENTS	8570.97	8570.97			
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	62618.28	448274.70			
	III. CASH SU	JMMARY				
23.	CASH ON HAND AT BEGINNING OF REPO	PRTING PERIOD	62540.66			
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)					
25.	5. SUBTOTAL (add Line 23 and Line 24)					
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	62618.28			
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)	IG PERIOD	0.00			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 OF 15 (check only one) 11a
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Anders for Congress			
Full Name (Last, First, Middle Initial) CENTURYLINK Mailing Address PO Box 91155				Date of Receipt
	City	State	Zip Code	09 29 2012
	SEATTLE	WA	98111	Transaction ID : SA11.201
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	1	PHONE EXPENSE REIMBURSE
	Receipt For: 2012 Primary General Other (specify)	Election C	ycle-to-Date 0.00	
В.	Full Name (Last, First, Middle Initial)			Date of Receipt
٠.	Mailing Address			M M / D D / Y Y Y Y
	City	State	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	Election C	ycle-to-Date	
	Other (specify)	L	, ,	
_	Full Name (Last, First, Middle Initial)			Date of Receipt
٠.	Mailing Address			M M / D D / Y Y Y Y
City State			Zip Code	
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation	ו	
	Receipt For: Primary General Other (specify)	Election C	ycle-to-Date	
s	UBTOTAL of Receipts This Page (optional)			41.79

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

41.79

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	FC	DR	LINE	NU	MBER:		PAGE	6 O	F	15
Use separate schedule(s) for each category of the Detailed Summary Page	(c	he	ck only	or	ne)					
			11a		11b		11c	11d		
			12		13a		13b	14	×	15
	_					_				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **Anders for Congress** Full Name (Last, First, Middle Initial) **BUSINESS BANK** Date of Receipt Mailing Address 2417 Meridian Street 80 2001 29 City State Zip Code Transaction ID: SA11.200 WA 98225 Bellingham FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 35.83 Name of Employer Occupation Interest Income Receipt For: 2012 Election Cycle-to-Date Primary General 0.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 35.83 SUBTOTAL of Receipts This Page (optional)..... 35.83 TOTAL This Period (last page this line number only).....

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate schedu for each category of Detailed Summary Pa	le(s) (cl	PAGE 7 OF 15 PAGE 7 OF 15		
	ny information copied from such Reports and Statements of for commercial purposes, other than using the name and			son for the purpose of soliciting contributions		
\rangle	NAME OF COMMITTEE (In Full) Anders for Congress					
۸.	Full Name (Last, First, Middle Initial) ELAVON		Date of Disbursement			
	Mailing Address 1 CONCOURSE PKWY NE SUITE 300			07 02 2012		
	City State ATLANTA GA	Zip Code 30328-5564		Amount of Each Disbursement this Period		
	Purpose of Disbursement BANK FEE		003	220.00 Transaction ID : SB17.I250		
	Candidate Name		Category/ Type			
	State: District: 00					
3.	Full Name (Last, First, Middle Initial) ELAVON			Date of Disbursement		
	Mailing Address 1 CONCOURSE PKWY NE SUITE 300			08 02 2012		
	City State	Zip Code		Amount of Each Disbursement this Period		
	ATLANTA GA Purpose of Disbursement	30328-5564		45.00		
	BÅNK FEE		003	Transaction ID : SB17.I251		
	Candidate Name		Category/ Type			
	President Other (or: 2012 y General (specify)				
	State: District: 00					
Э.	Full Name (Last, First, Middle Initial) LITZIA LLC			Date of Disbursement		
	Mailing Address 314 E HOLLY ST SUITE 205			09		
	City State Z	Zip Code		Amount of Each Disbursement this Period		
	BELLINGHAM WA Purpose of Disbursement WEB SERVICE	98225-4736	001	32.61		
	Candidate Name	C	Category/	Transaction ID : SB17.I256		
	Office Sought: House Senate President Disbursement Formation Primary Other (
	State: District: 00					
9	IIRTOTAL of Dishursements This Page (optional)			297.61		

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

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SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate s for each categ Detailed Summ	schedule(s) ory of the	FOR LINE NUMBER: PAGE 8 OF 15 (check only one) X 17		
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) Anders for Congress					
Full Name (Last, First, Middle Initial) PAKMAIL Mailing Address 2950 NEWMARKET ST			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City BELLINGHAM Purpose of Disbursement POSTAGE	State Zip Code WA 98226-3872	001	Amount of Each Disbursement this Period		
Candidate Name Office Sought: House Senate President State: District: 00	Disbursement For: 2012 Primary Genera Other (specify)	Category/ Type	Transaction ID : SB17.I252		
Full Name (Last, First, Middle Initial) QUICKBOOKS Mailing Address 2632 MARINE WAY			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City MOUNTAIN VIEW Purpose of Disbursement WEB SERVICE Candidate Name Office Sought: House	State Zip Code CA 94043-1126	001 Category/ Type	Amount of Each Disbursement this Period 23.44 Transaction ID : SB17.I253		
Senate President State: District: 00	Primary Genera Other (specify)	I			
Full Name (Last, First, Middle Initial) QUICKBOOKS Mailing Address 2632 MARINE WAY			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City MOUNTAIN VIEW Purpose of Disbursement WEB SERVICE Candidate Name	State Zip Code CA 94043-1126	001 Category/ Type	Amount of Each Disbursement this Period 33.91 Transaction ID : SB17.I254		
Office Sought: House Senate President State: District: 00	Disbursement For: 2012 Primary General Other (specify)				
SUBTOTAL of Disbursements This Page (or	otional)		192.35		

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

NAME OF COMMITTEE (In Full) Anders for Congress

QUICKBOOKS

MOUNTAIN VIEW

WEB SERVICE

Candidate Name

Office Sought:

State:

City

BELLINGHAM

Candidate Name

Office Sought:

Purpose of Disbursement RENT

Purpose of Disbursement

City

Full Name (Last, First, Middle Initial)

Mailing Address 2632 MARINE WAY

House Senate

House

District:

WHATCOM AERO SERVICES

Mailing Address 1980 W BAKERVIEW RD

Full Name (Last, First, Middle Initial)

President

CA

WA

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

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

PAGE 15 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19b 19a Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. Date of Disbursement 2012 08 09 State Zip Code Amount of Each Disbursement this Period 94043-1126 57.35 001 Transaction ID: SB17.I255 Category/ Type Disbursement For: 2012 Primary General Other (specify) Date of Disbursement 09 29 2012 State Zip Code Amount of Each Disbursement this Period 98226-9133 900.00 001 Transaction ID: SB17.I257 Category/ Type Disbursement For: 2012 ✓ Primary General

State:	Senate President District: 00	Primary General Other (specify)				
Full Name (Last Mailing Address	r, First, Middle Initial)			Date of Disbursement		
City State Zip Code				Amount of Each Disbursement this Period		
Purpose of Disk	oursement					
Candidate Name	е		Category/ Type			
Office Sought: State:	House Senate President District:	Disbursement For: Primary General Other (specify)	•			
		'		957.35		

1447.31

S

	CHEDULE B (I EMIZED DISBU	Use separate so for each catego Detailed Summo	ry of the	FOR LINE NUMBER: PAGE 10 OF 15 (check only one) 17	
					person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTE Anders for Cor	,			
Α.	Full Name (Last, First, GREG ANDER	,			Date of Disbursement
Mailing Address 2950 Newmarket Place, #101-251					08 29 2012
	City BELLINGHAM	Stat WA			Amount of Each Disbursement this Period
	Purpose of Disbursem LOAN REPAYMENT	nent		009	52600.00 Transaction ID : SB19A.100
	Candidate Name GREG ANDER	RS		Category/ Type	
	Office Sought: State: WA Dis	Senate	nt For: 2012 mary General her (specify)	71	
_	Full Name (Last, First,				
В.	Mailing Address				Date of Disbursement
	City	Stat	te Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursem	nent			
	Candidate Name			Category/	
	Office Sought:	President Otl	nt For: mary General her (specify)	Туре	
_	State: Dis Full Name (Last, First,	trict:			
C.	•	Wildle Hillary			Date of Disbursement
	Mailing Address				M M / D D / Y Y Y
	City	State	Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursem	nent			1,
	Candidate Name			Category/ Type	1
	Office Sought:		nt For: mary General her (specify)		
_	State: Dis	trict:			
5	SUBTOTAL of Disburse	ments This Page (optional)			52600.00

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

52600.00

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule for each category of the Detailed Summary Pag	e(s) (check	LINE NUMBE only one) 17 20a	18 20b	PAGE 11 19a 20c	OF 15 19b X 21
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and						
NAME OF COMMITTEE (In Full) Anders for Congress						
Full Name (Last, First, Middle Initial) A. DAN MATTHEWS FOR CONGRESS Mailing Address PO BOX 12457			Date of Disbu	ursement	2012	
City State EVERETT WA	Zip Code 98206-2457	,	Amount of Ea	ach Disburs		
Purpose of Disbursement CAMPAIGN CONTRIBUTION		011	moneties ID	. CD24 140		00.00
Candidate Name DAN MATTHEWS		ategory/ Type	ansaction ID	. 3621.110	1	
State: WA District: 02						
Full Name (Last, First, Middle Initial) FRIENDS OF BILL DRISCOLL			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address PO BOX 1432						
City State TACOMA WA	Zip Code 98401-1432	,	Amount of Ea	ach Disburs	sement this	s Period
Purpose of Disbursement CAMPAIGN CONTRIBUTION Candidate Name BILL DRISCOLL	Ca	011 Tra	ansaction ID	: SB21.I10		00.00
Office Sought: Senate Disbursement F						
Full Name (Last, First, Middle Initial) COMBAT VETERANS FOR CONGRES	SS PAC		Date of Disbu	ursement	Y Y Y	V
Mailing Address 2307 FENTON PKWY SUITE 107-184			09	29	2012	
City State SAN DIEGO CA	Zip Code 92108	,	Amount of Ea	ach Disburs	sement this	s Period
Purpose of Disbursement POLITICAL CONTRIBUTION	011		0001110		70.97	
Candidate Name COMBAT VETERANS FOR CONGRE Office Sought: House Disbursement F	SS PAC	ategory/ Type	insaction ID	: SB21.I104	1	
Senate Prima						
SUBTOTAL of Disbursements This Page (optional)					657	70.97

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

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	l		FOR LINE NUMBER: PAGE 12 OF 15 (check only one) 17 18 19a 19b 20a 20b 20c X 21		
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a			person for the purpose of soliciting contributions		
\rangle	NAME OF COMMITTEE (In Full) Anders for Congress					
۹.	Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN CONGRESSI	ITTEE	Date of Disbursement			
Mailing Address 320 FIRST STREET SE.				09 29 2012		
	City State WASHINGTON DC	Zip Code 20003		Amount of Each Disbursement this Period		
	Purpose of Disbursement POLITICAL CONTRIBUTION		011	Transaction ID : SB21.I103		
	Candidate Name NATIONAL REPUBLICAN CONGRESSIONAL CO	DMMITTEE	Category/ Type			
	Office Sought: House Senate President State: Disbursement For: Primary Other (s	General				
3.	Full Name (Last, First, Middle Initial) WASHINGTON STATE REPUBLICAN P	PARTY		Date of Disbursement		
	Mailing Address 11811 NE 1ST STREET SUITE A306			09 29 2012		
	City State BELLEVUE WA	Zip Code 98005		Amount of Each Disbursement this Period		
	Purpose of Disbursement POLITICAL CONTRIBUTION		011	1000.00		
	Candidate Name WASHINGTON STATE REPUBLICAN F	PARTY	Category/ Type	Transaction ID : SB21.I102		
	Office Sought: House Senate President State: Disbursement For: Other (s	: 2012 General	1,500			
•	Full Name (Last, First, Middle Initial)			Date of Disbursement		
<i>.</i>	Mailing Address			M " M / D " D / Y " Y " Y " Y		
	City State Zip	p Code		Amount of Each Disbursement this Period		
	Purpose of Disbursement					
	Candidate Name	Category/ Type				
	Office Sought: House Senate Primary President State: Disbursement For: Other (s	General				
s	UBTOTAL of Disbursements This Page (optional)			2000.00		
	TOTAL This Period (last page this line number only)					

SCHEDULE C (FEC Form 3)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

13

×	13a
	13h

15

for each category of the **LOANS** (check only one) Detailed Summary Page Transaction ID: 1 NAME OF COMMITTEE (In Full) Anders for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Greg Anders General Mailing Address Other (specify) 2950 Newmarket Place, #101-251 State ZIP Code City WA 98226 Bellingham Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 10000.00 10000.00 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D30 ^M06^M 2011 7/1/2012 6.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 0.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

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×	13a
	13h

15

(check only one) Detailed Summary Page Transaction ID: 2 NAME OF COMMITTEE (In Full) Anders for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary **GREG ANDERS** General Mailing Address Other (specify) \blacktriangledown 2950 NEWMARKET ST, #101-251 State ZIP Code City WA 98226-3872 **BELLINGHAM** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 177600.00 177600.00 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 09^M ^D30 2011 7/1/2012 8.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 0.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

15

	il
X	13a
	13h

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(check only one) Detailed Summary Page Transaction ID: 3 NAME OF COMMITTEE (In Full) Anders for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary **GREG ANDERS** General Mailing Address Other (specify) \blacktriangledown 2950 NEWMARKET ST, #101-251 State ZIP Code City WA 98226-3872 **BELLINGHAM** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 75000.00 75000.00 0.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 12^M ^D30 2011 7/1/2012 8.00 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 0.00 TOTALS This Period (last page in this line only) 0.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.