

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Joanne Dowdell for Congress

ADDRESS (number and street)

1465 Woodbury Ave

PMB 400

Check if different than previously reported. (ACC)

Portsmouth

NH

03801

2. FEC IDENTIFICATION NUMBER ▼

C C00495838

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NH

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Joanne Dowdell

Signature of Treasurer Joanne Dowdell

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Joanne Dowdell for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 09 / 30 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	201912.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	18850.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	183062.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	500.00	168292.69
(b) Total Offsets to Operating Expenditures (from Line 14).....	4.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	496.00	168292.69
8. Cash on Hand at Close of Reporting Period (from Line 27).....	666.07	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Joanne Dowdell 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).....	0.00	195912.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	0.00	195912.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) The Candidate.....	0.00	5000.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	201912.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	12000.00
(b) All Other Loans.....	0.00	15000.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	27000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	4.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	4.00	228912.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	500.00	168292.69
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	12000.00
(b) Of All Other Loans	0.00	15000.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	27000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	17850.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	18850.00
21. OTHER DISBURSEMENTS	1250.00	1285.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	1750.00	215427.69

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2412.07
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	4.00
25. SUBTOTAL (add Line 23 and Line 24).....	2416.07
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1750.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	666.07

**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 5 OF 6			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Joanne Dowdell for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. Next Level Partners		<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 15320		Amount of Each Disbursement this Period											
City Washington State DC Zip Code 20003		<table border="1"> <tr> <td>500.00</td> </tr> </table>		500.00									
500.00													
Purpose of Disbursement Consultant - Compliance		Transaction ID : SB17.4191											
Candidate Name		Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2012											
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B.		<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></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y									
Mailing Address		Amount of Each Disbursement this Period											
City State Zip Code		<table border="1"> <tr> <td></td> </tr> </table>											
Purpose of Disbursement		Category/Type											
Candidate Name		Disbursement For:											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C.		<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></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y									
Mailing Address		Amount of Each Disbursement this Period											
City State Zip Code		<table border="1"> <tr> <td></td> </tr> </table>											
Purpose of Disbursement		Category/Type											
Candidate Name		Disbursement For:											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 6	
	<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)
Joanne Dowdell for Congress

Full Name (Last, First, Middle Initial) A. Friends of Jackie Cilley		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 2 Oak Hill Rd		Amount of Each Disbursement this Period 250.00 Transaction ID : SB21.4193
City Barrington	State NH	
Zip Code 03825	Purpose of Disbursement Contribution	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. Julia Brownley for Congress		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address PO Box 2018		Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.4188
City Thousand Oaks	State CA	
Zip Code 91358	Purpose of Disbursement Contribution	Category/ Type
Candidate Name Julia Brownley	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: CA District: 26	Other (specify)	

Full Name (Last, First, Middle Initial) c. Kuster for Congress, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address PO Box 1498		Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.4189
City Concord	State NH	
Zip Code 03302	Purpose of Disbursement Contribution	Category/ Type
Candidate Name Ann McLane Kuster	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: NH District: 02	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	1250.00