

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Anders 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))....	28501.40	178678.75
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	28501.40	178678.75
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	41405.51	82554.91
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	41405.51	82554.91
8. Cash on Hand at Close of Reporting Period (from Line 27).....	349237.43	
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).....	252600.00	

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

Anders 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).....	23829.60	158733.28
(ii) Unitemized.....	3671.80	6766.56
(iii) TOTAL of contributions from individuals ▶	27501.40	165499.84
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	8178.91
(d) The Candidate.....	0.00	5000.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	28501.40	178678.75
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	75000.00	262600.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	75000.00	262600.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	326.12	326.12
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	103827.52	441604.87

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	41405.51	82554.91
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	10000.00	10000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	10000.00	10000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	51405.51	92554.91

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	296815.42
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	103827.52
25. SUBTOTAL (add Line 23 and Line 24).....	400642.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	51405.51
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	349237.43

**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 44
	<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)
Anders for Congress

A. Full Name (Last, First, Middle Initial)
WILLIAM C. ALLMON

Mailing Address 3225A S RAINBOW BLVD
SUITE 102

City LAS VEGAS State NV Zip Code 89146-6500

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

Name of Employer LAS-CAL CORPORATION Occupation EXECUTIVE

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 13 / 2011

Transaction ID : SA11.189

Amount of Each Receipt this Period
1500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL BAYER

Mailing Address 23113 PARK MARCO POLO

City CALABASAS State CA Zip Code 91302-2824

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

Name of Employer SELF Occupation COMMERCIAL REAL ESTATE

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 20 / 2011

Transaction ID : SA11.149

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DAVE BECKETT

Mailing Address 1512 CRESTWOOD LN

City MCLEAN State VA Zip Code 22101-2508

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

Name of Employer DEFENSE GROUP INC Occupation SENIOR ANALYST

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 14 / 2011

Transaction ID : SA11.166

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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: PAGE 6 OF 44
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Anders for Congress

A. Full Name (Last, First, Middle Initial)
JAMES AUGUSTUS CAVANAUGH JR.

Mailing Address 16885 DALLAS PARKWAY

City State Zip Code
ADDISON TX 75001-5215

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

Name of Employer Occupation
JANI-KING INT'L, INC. FOUNDER/OWNER/CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 25 2011

Transaction ID : SA11.174

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHARLES C COTTRELL

Mailing Address 6212 GENTLE LANE

City State Zip Code
ALEXANDRIA VA 22310-2259

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

Name of Employer Occupation
NAIMA ENGINEER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 22 2011

Transaction ID : SA11.173

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DANNY FRIEDKIN

Mailing Address 3390 INWOOD

City State Zip Code
HOUSTON TX 77019-3106

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

Name of Employer Occupation
NONE STUDENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 21 2011

Transaction ID : SA11.171

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

3250.00

**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 44
	<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)
Anders for Congress

A. Full Name (Last, First, Middle Initial)
RYAN FRIEDKIN

Mailing Address 3390 INWOOD

City HOUSTON State TX Zip Code 77019-3106

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

Name of Employer NONE Occupation STUDENT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2011

Transaction ID : SA11.172

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THOMAS H. FRIEDKIN

Mailing Address PO BOX 4718

City HOUSTON State TX Zip Code 77210-4718

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

Name of Employer THE FRIEDKIN COMPANIES Occupation CHAIRMAN OF THE BOARD

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2011

Transaction ID : SA11.167

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AL A. GONSOULIN

Mailing Address 10 MUIRFIELD WAY

City SUGAR LAND State TX Zip Code 77479-3966

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

Name of Employer PHI, INC. Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : SA11.179

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

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 8 OF 44
	<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)
Anders for Congress

A. Full Name (Last, First, Middle Initial)
GREG HISER

Mailing Address **PO BOX 771320**

City **WICHITA** State **KS** Zip Code **67277-1320**

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

Name of Employer **AIR CAPITAL INSURANCE** Occupation **EXECUTIVE**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 12 / 2011

Transaction ID : SA11.160

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GREG HISER

Mailing Address **PO BOX 771320**

City **WICHITA** State **KS** Zip Code **67277-1320**

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

Name of Employer **AIR CAPITAL INSURANCE** Occupation **EXECUTIVE**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 09 / 2011

Transaction ID : SA11.161

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DON KEATING

Mailing Address **656 LAKE SAMMAMISH LANE NE**

City **BELLEVUE** State **WA** Zip Code **98008-4208**

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

Name of Employer **604 MANAGEMENT LLC** Occupation **MANAGER**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1076.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 03 / 2011

Transaction ID : SA11.176

Amount of Each Receipt this Period
1076.00
 CONTRIBUTION

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

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

2076.00

**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 44
	<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)
Anders for Congress

A. Full Name (Last, First, Middle Initial)
WAYNE L LAUFER

Mailing Address 4989 JOEWOOD DR

City SANIBEL State FL Zip Code 33957-7511

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2011

Transaction ID : SA11.150

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT W LUNDEEN

Mailing Address PO BOX 223

City DEER HARBOR State WA Zip Code 98243-0223

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2011

Transaction ID : SA11.148

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GREGORY MICHAEL MOGA III

Mailing Address 1568 PARKSIDE DR E

City SEATTLE State WA Zip Code 98112-3720

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

Name of Employer OUTREACH SERVICES Occupation EXECUTIVE

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 06 / 2011

Transaction ID : SA11.140

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

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 10 OF 44
	<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)
Anders for Congress

A. Full Name (Last, First, Middle Initial)
MARK NELSON

Mailing Address **2524 MERIDIAN ST**

City **BELLINGHAM** State **WA** Zip Code **98225-2407**

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

Name of Employer **SELF** Occupation **SENIOR FINANCIAL PLANNER**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 13 / 2011

Transaction ID : SA11.188

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DOUG ROZENDALL

Mailing Address **1515 18TH ST SW**

City **MASON CITY** State **IA** Zip Code **50401-5605**

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

Name of Employer **SELF** Occupation **BUSINESS OWNER**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
427.60

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 02 / 2011

Transaction ID : SA11.175

Amount of Each Receipt this Period
177.60
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TYLER RYAN

Mailing Address **4731 COLUMBUS AVE**

City **BELLINGHAM** State **WA** Zip Code **98229-2737**

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

Name of Employer **PROFESSIONAL EQUITY MANAGEMENT** Occupation **FINANCIAL ADVISOR**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 07 / 2011

Transaction ID : SA11.178

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

1427.60

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

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

FOR LINE NUMBER: PAGE 11 OF 44
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Anders for Congress

A. Full Name (Last, First, Middle Initial)
STEVE SCOTT

Mailing Address 3994 BLUE CANYON RD

City State Zip Code
SEDRO WOOLLEY WA 98284-9504

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

Name of Employer Occupation
HUB INTERNATIONAL NORTHWEST, LLC INSURANCE

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2011

Transaction ID : SA11.158

Amount of Each Receipt this Period
 1500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM H SLEEPER

Mailing Address 7754 NE BERGMAN RD

City State Zip Code
BAINBRIDGE ISLAND WA 98110-1291

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

Name of Employer Occupation
UNITED AIRLINES PILOT

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2011

Transaction ID : SA11.139

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RICHARD SUGDEN

Mailing Address P.O. BOX 2468

City State Zip Code
JACKSON WY 83001-2468

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

Name of Employer Occupation
SELF PHYSICIAN

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3576.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2011

Transaction ID : SA11.204

Amount of Each Receipt this Period
 1076.00

CONTRIBUTION

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

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

3076.00

**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 44
	<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)
Anders for Congress

A. Full Name (Last, First, Middle Initial)
LAWRENCE WALTERS

Mailing Address 1954 SOUTH MAHONIA PLACE

City BELLINGHAM State WA Zip Code 98229-6938

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

Name of Employer Bellingham Anesthesia Associates Occupation M.D.

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011

Transaction ID : SA11.187

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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).....

250.00

23829.60

**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 44
	<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)
Anders for Congress

A. Full Name (Last, First, Middle Initial)
DUNCAN D. HUNTER FOR CONGRESS

Mailing Address 9340 FUERTE DR
SUITE 302

City LA MESA State CA Zip Code 91941-4164

FEC ID number of contributing federal political committee. **C** C00433524

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2011

Transaction ID : SA11.153

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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 / 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 / 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).....

1000.00

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 14 OF 44
	<input type="checkbox"/> 11a 12 <input checked="" 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)
Anders for Congress

A. Full Name (Last, First, Middle Initial)
GREG ANDERS

Mailing Address 2950 NEWMARKET ST
#101-251

City BELLINGHAM State WA Zip Code 98226-3872

FEC ID number of contributing federal political committee. **C** C00496877

Name of Employer HERITAGE FLIGHT MUSEUM Occupation PILOT; MUSEUM DIRECTOR

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2011

Transaction ID : SA11.206

Amount of Each Receipt this Period
75000.00

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).....

75000.00

75000.00

**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 44
	<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)
Anders for Congress

A. Full Name (Last, First, Middle Initial)
BUSINESS BANK

Mailing Address 2417 Meridian St
#104

City Bellingham State WA Zip Code 98225-2430

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2011

Transaction ID : SA11.207

Amount of Each Receipt this Period
 108.91

INTEREST INCOME

B. Full Name (Last, First, Middle Initial)
BUSINESS BANK

Mailing Address 2417 Meridian St
#104

City Bellingham State WA Zip Code 98225-2430

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2011

Transaction ID : SA11.208

Amount of Each Receipt this Period
 105.93

INTEREST INCOME

C. Full Name (Last, First, Middle Initial)
BUSINESS BANK

Mailing Address 2417 Meridian St
#104

City Bellingham State WA Zip Code 98225-2430

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : SA11.209

Amount of Each Receipt this Period
 111.28

INTEREST INCOME

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

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

326.12

326.12

**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 16 OF 44			
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. GREG ANDERS		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2011
Mailing Address 2950 Newmarket Place, #101-251		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.I170
City BELLINGHAM State WA Zip Code 98226-3872	Purpose of Disbursement INTEREST PAID 001 Category/Type	
Candidate Name GREG ANDERS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 02		

Full Name (Last, First, Middle Initial) B. TRAVIS BLACK		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2011
Mailing Address PO BOX 28340		Amount of Each Disbursement this Period 134.55 Transaction ID : SB17.I82
City BELLINGHAM State WA Zip Code 98228-0340	Purpose of Disbursement OFFICE SUPPLIES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District: 00		

Full Name (Last, First, Middle Initial) C. TRAVIS BLACK		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2011
Mailing Address PO BOX 28340		Amount of Each Disbursement this Period 53.84 Transaction ID : SB17.I87
City BELLINGHAM State WA Zip Code 98228-0340	Purpose of Disbursement OFFICE SUPPLIES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District: 00		

SUBTOTAL of Disbursements This Page (optional).....	388.39
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 17 OF 44	
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. JASON EASTON		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2011
Mailing Address 424 W BAKERVIEW RD SUITE 105		Amount of Each Disbursement this Period 1875.00 Transaction ID : SB17.I81
City BELLINGHAM State WA Zip Code 98226-8176	Purpose of Disbursement POLITICAL STRATEGY CONSULTING Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: District: 00	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. JASON EASTON		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2011
Mailing Address 424 W BAKERVIEW RD SUITE 105		Amount of Each Disbursement this Period 1875.00 Transaction ID : SB17.I83
City BELLINGHAM State WA Zip Code 98226-8176	Purpose of Disbursement POLITICAL STRATEGY CONSULTING Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: District: 00	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. JASON EASTON		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2011
Mailing Address 424 W BAKERVIEW RD SUITE 105		Amount of Each Disbursement this Period 1875.00 Transaction ID : SB17.I84
City BELLINGHAM State WA Zip Code 98226-8176	Purpose of Disbursement POLITICAL STRATEGY CONSULTING Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: District: 00	<input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	5625.00
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 18 OF 44			
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. JASON EASTON		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2011
Mailing Address 424 W BAKERVIEW RD SUITE 105		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.I85
City BELLINGHAM State WA Zip Code 98226-8176	Purpose of Disbursement POLITICAL STRATEGY CONSULTING Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	

Full Name (Last, First, Middle Initial) B. JASON EASTON		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011
Mailing Address 424 W BAKERVIEW RD SUITE 105		Amount of Each Disbursement this Period 3125.00 Transaction ID : SB17.I86
City BELLINGHAM State WA Zip Code 98226-8176	Purpose of Disbursement POLITICAL STRATEGY CONSULTING Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	

Full Name (Last, First, Middle Initial) C. JASON EASTON		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2011
Mailing Address 424 W BAKERVIEW RD SUITE 105		Amount of Each Disbursement this Period 2750.00 Transaction ID : SB17.I88
City BELLINGHAM State WA Zip Code 98226-8176	Purpose of Disbursement POLITICAL STRATEGY CONSULTING Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	

SUBTOTAL of Disbursements This Page (optional).....	6375.00
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 19 OF 44			
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. JASON EASTON		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2011
Mailing Address 424 W BAKERVIEW RD SUITE 105		Amount of Each Disbursement this Period 168.06 Transaction ID : SB17.I89
City BELLINGHAM State WA Zip Code 98226-8176	Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	

Full Name (Last, First, Middle Initial) B. JASON EASTON		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2011
Mailing Address 424 W BAKERVIEW RD SUITE 105		Amount of Each Disbursement this Period 2750.00 Transaction ID : SB17.I90
City BELLINGHAM State WA Zip Code 98226-8176	Purpose of Disbursement POLITICAL STRATEGY CONSULTING Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	

Full Name (Last, First, Middle Initial) C. MARTIN MOSKOWITZ		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address 2950 NEWMARKET ST #101-259		Amount of Each Disbursement this Period 421.74 Transaction ID : SB17.I162
City BELLINGHAM State WA Zip Code 98226-3872	Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	Original vendors exceeding reporting threshold itemized as memo transactions.

SUBTOTAL of Disbursements This Page (optional).....	3339.80
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 20 OF 44			
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. COSTCO		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address 4299 MERIDIAN ST		Amount of Each Disbursement this Period 421.74
City BELLINGHAM State WA Zip Code 98226-6475	Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	Transaction ID : SB17.I166 [MEMO ITEM] Subitemization of Transaction SB17.I162

Full Name (Last, First, Middle Initial) B. MARTIN MOSKOWITZ		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2011
Mailing Address 2950 NEWMARKET ST #101-259		Amount of Each Disbursement this Period 302.82
City BELLINGHAM State WA Zip Code 98226-3872	Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	Transaction ID : SB17.I163 Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) C. COSTCO		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2011
Mailing Address 4299 MERIDIAN ST		Amount of Each Disbursement this Period 302.82
City BELLINGHAM State WA Zip Code 98226-6475	Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	Transaction ID : SB17.I167 [MEMO ITEM] Subitemization of SB17.I163

SUBTOTAL of Disbursements This Page (optional).....	302.82
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 21 OF 44	
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. AIPAC		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2011
Mailing Address 1424 4TH AVE # 515		Amount of Each Disbursement this Period 150.00
City SEATTLE State WA Zip Code 98101-2297	Purpose of Disbursement POLITICAL EVENT	Transaction ID : SB17.I109
Candidate Name	Category/Type 007	ANNUAL DINNER
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	

Full Name (Last, First, Middle Initial) B. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2011
Mailing Address 705 5TH AVE S		Amount of Each Disbursement this Period 84.15
City SEATTLE State WA Zip Code 98104-4423	Purpose of Disbursement RESEARCH PUBLICATIONS	Transaction ID : SB17.I107
Candidate Name	Category/Type 006	BOOKS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	

Full Name (Last, First, Middle Initial) C. AMEX		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2011
Mailing Address PO BOX 981540		Amount of Each Disbursement this Period 0.88
City EL PASO State TX Zip Code 79998-1540	Purpose of Disbursement BANK FEE	Transaction ID : SB17.I118
Candidate Name	Category/Type 003	BANK CHARGES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	

SUBTOTAL of Disbursements This Page (optional).....	235.03
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 22 OF 44	
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. AMEX		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address PO BOX 981540		Amount of Each Disbursement this Period 78.51
City EL PASO State TX Zip Code 79998-1540	Purpose of Disbursement BANK FEE 003 Category/Type	
Candidate Name		Transaction ID : SB17.I138
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	BANK CHARGES	
State: District: 00		

Full Name (Last, First, Middle Initial) B. AMEX		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2011
Mailing Address PO BOX 981540		Amount of Each Disbursement this Period 35.49
City EL PASO State TX Zip Code 79998-1540	Purpose of Disbursement BANK FEE 003 Category/Type	
Candidate Name		Transaction ID : SB17.I95
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	BANK CHARGES	
State: District: 00		

Full Name (Last, First, Middle Initial) C. AXIOM STRATEGIES, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2011
Mailing Address 1251 NW BRIARCLIFF PKWY SUITE 85		Amount of Each Disbursement this Period 2500.00
City KANSAS CITY State MO Zip Code 64116-1786	Purpose of Disbursement POLITICAL STRATEGY CONSULTING 001 Category/Type	
Candidate Name		Transaction ID : SB17.I114
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	GENERAL CONSULTING SERVICES	
State: District: 00		

SUBTOTAL of Disbursements This Page (optional).....	2614.00
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 23 OF 44	
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. AXIOM STRATEGIES, LLC			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011	
Mailing Address 1251 NW BRIARCLIFF PKWY SUITE 85			Amount of Each Disbursement this Period 2500.00	
City KANSAS CITY	State MO	Zip Code 64116-1786	Transaction ID : SB17.I133	
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		001	GENERAL CONSULTING SERVICES	
Candidate Name		Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District: 00				

Full Name (Last, First, Middle Initial) B. AXIOM STRATEGIES, LLC			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011	
Mailing Address 1251 NW BRIARCLIFF PKWY SUITE 85			Amount of Each Disbursement this Period 6910.03	
City KANSAS CITY	State MO	Zip Code 64116-1786	Transaction ID : SB17.I136	
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		001	GENERAL CONSULTING SERVICES	
Candidate Name		Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District: 00				

Full Name (Last, First, Middle Initial) C. BALAM AND ASSOCIATES			Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2011	
Mailing Address 2524 MERIDIAN ST			Amount of Each Disbursement this Period 750.00	
City BELLINGHAM	State WA	Zip Code 98225-2407	Transaction ID : SB17.I102	
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		001	CONSULTING	
Candidate Name		Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District: 00				

SUBTOTAL of Disbursements This Page (optional).....	10160.03
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 24 OF 44	
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. BALAM AND ASSOCIATES		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2011
Mailing Address 2524 MERIDIAN ST		Amount of Each Disbursement this Period 750.00
City BELLINGHAM State WA Zip Code 98225-2407	Purpose of Disbursement POLITICAL STRATEGY CONSULTING Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	Transaction ID : SB17.I112 CONSULTING

Full Name (Last, First, Middle Initial) B. BALAM AND ASSOCIATES		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011
Mailing Address 2524 MERIDIAN ST		Amount of Each Disbursement this Period 750.00
City BELLINGHAM State WA Zip Code 98225-2407	Purpose of Disbursement POLITICAL STRATEGY CONSULTING Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	Transaction ID : SB17.I134 CONSULTING

Full Name (Last, First, Middle Initial) C. BALAM AND ASSOCIATES		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2011
Mailing Address 2524 MERIDIAN ST		Amount of Each Disbursement this Period 750.00
City BELLINGHAM State WA Zip Code 98225-2407	Purpose of Disbursement POLITICAL STRATEGY CONSULTING Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	Transaction ID : SB17.I91 CONSULTING

SUBTOTAL of Disbursements This Page (optional).....	2250.00
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 25 OF 44			
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. BEST BUY		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2011
Mailing Address 4281 MERIDIAN ST		Amount of Each Disbursement this Period 554.36 Transaction ID : SB17.I94
City BELLINGHAM State WA Zip Code 98226-6475	Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	

Full Name (Last, First, Middle Initial) B. CENTURYLINK		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2011
Mailing Address PO BOX 91155		Amount of Each Disbursement this Period 114.80 Transaction ID : SB17.I144
City SEATTLE State WA Zip Code 98111-9255	Purpose of Disbursement PHONE SVC Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	

Full Name (Last, First, Middle Initial) C. CLEARWIRE		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2011
Mailing Address DEPT CH 14365		Amount of Each Disbursement this Period 104.34 Transaction ID : SB17.I124
City PALATINE State IL Zip Code 60055	Purpose of Disbursement UTILITIES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	

SUBTOTAL of Disbursements This Page (optional).....	773.50
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 26 OF 44			
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. CLEARWIRE		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2011
Mailing Address DEPT CH 14365		Amount of Each Disbursement this Period 878.75 Transaction ID : SB17.I150
City PALATINE State IL Zip Code 60055	Purpose of Disbursement UTILITIES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District: 00		

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2011
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 825.00 Transaction ID : SB17.I103
City FALLS CHURCH State VA Zip Code 22043-2625	Purpose of Disbursement WEB SERVICE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District: 00		

Full Name (Last, First, Middle Initial) C. CMDI		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 3.75 Transaction ID : SB17.I111
City FALLS CHURCH State VA Zip Code 22043-2625	Purpose of Disbursement BANK FEE 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District: 00		

SUBTOTAL of Disbursements This Page (optional).....	878.75
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 27 OF 44			
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. CMDI		<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>11</td> <td></td> <td>07</td> <td></td> <td>2011</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		07		2011
M M	/	D D	/	Y Y Y Y								
11		07		2011								
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>FALLS CHURCH</td> <td>VA</td> <td>22043-2625</td> </tr> </table>			City	State	Zip Code	FALLS CHURCH	VA	22043-2625				
City	State	Zip Code										
FALLS CHURCH	VA	22043-2625										
Purpose of Disbursement BANK FEE	Category/ Type 003	<table border="1"> <tr> <td>829.64</td> </tr> </table>	829.64									
829.64												
Candidate Name												
Office Sought:	Disbursement For: 2012	Transaction ID : SB17.I117										
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<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General										
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)											
<input type="checkbox"/> President												
State: District: 00												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. CMDI		<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>11</td> <td></td> <td>14</td> <td></td> <td>2011</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		14		2011
M M	/	D D	/	Y Y Y Y								
11		14		2011								
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>FALLS CHURCH</td> <td>VA</td> <td>22043-2625</td> </tr> </table>			City	State	Zip Code	FALLS CHURCH	VA	22043-2625				
City	State	Zip Code										
FALLS CHURCH	VA	22043-2625										
Purpose of Disbursement BANK FEE	Category/ Type 003	<table border="1"> <tr> <td>2.14</td> </tr> </table>	2.14									
2.14												
Candidate Name												
Office Sought:	Disbursement For: 2012	Transaction ID : SB17.I122										
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<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General										
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)											
<input type="checkbox"/> President												
State: District: 00												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. CMDI		<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>11</td> <td></td> <td>18</td> <td></td> <td>2011</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		18		2011
M M	/	D D	/	Y Y Y Y								
11		18		2011								
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>FALLS CHURCH</td> <td>VA</td> <td>22043-2625</td> </tr> </table>			City	State	Zip Code	FALLS CHURCH	VA	22043-2625				
City	State	Zip Code										
FALLS CHURCH	VA	22043-2625										
Purpose of Disbursement WEB SERVICE	Category/ Type 001	<table border="1"> <tr> <td>825.00</td> </tr> </table>	825.00									
825.00												
Candidate Name												
Office Sought:	Disbursement For: 2012	Transaction ID : SB17.I125										
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<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General										
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)											
<input type="checkbox"/> President												
State: District: 00												

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>829.64</td> </tr> </table>	829.64
829.64		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**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 28 OF 44	
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2011
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 15.13
City FALLS CHURCH	State VA	
Zip Code 22043-2625	Purpose of Disbursement BANK FEE	Transaction ID : SB17.I127
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District: 00		

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2011
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 93.75
City FALLS CHURCH	State VA	
Zip Code 22043-2625	Purpose of Disbursement BANK FEE	Transaction ID : SB17.I130
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	BANK CHARGES
State: District: 00		

Full Name (Last, First, Middle Initial) C. CMDI		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 4.44
City FALLS CHURCH	State VA	
Zip Code 22043-2625	Purpose of Disbursement BANK FEE	Transaction ID : SB17.I137
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	BANK CHARGES
State: District: 00		

SUBTOTAL of Disbursements This Page (optional).....	113.32
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 29 OF 44			
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. CMDI		<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>12</td> <td></td> <td>12</td> <td></td> <td>2011</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	12		12		2011
M M	/	D D	/	Y Y Y Y								
12		12		2011								
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period										
City State Zip Code FALLS CHURCH VA 22043-2625		<table border="1"> <tr> <td>35.81</td> </tr> </table>	35.81									
35.81												
Purpose of Disbursement BANK FEE		Transaction ID : SB17.I145										
Candidate Name		BANK CHARGES										
Office Sought:	Disbursement For: 2012											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District: 00												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. CMDI		<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>12</td> <td></td> <td>19</td> <td></td> <td>2011</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	12		19		2011
M M	/	D D	/	Y Y Y Y								
12		19		2011								
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period										
City State Zip Code FALLS CHURCH VA 22043-2625		<table border="1"> <tr> <td>29.33</td> </tr> </table>	29.33									
29.33												
Purpose of Disbursement BANK FEE		Transaction ID : SB17.I151										
Candidate Name		BANK CHARGES										
Office Sought:	Disbursement For: 2012											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District: 00												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. CMDI		<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>12</td> <td></td> <td>20</td> <td></td> <td>2011</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	12		20		2011
M M	/	D D	/	Y Y Y Y								
12		20		2011								
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period										
City State Zip Code FALLS CHURCH VA 22043-2625		<table border="1"> <tr> <td>825.00</td> </tr> </table>	825.00									
825.00												
Purpose of Disbursement WEB SERVICE		Transaction ID : SB17.I152										
Candidate Name												
Office Sought:	Disbursement For: 2012											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District: 00												

SUBTOTAL of Disbursements This Page (optional).....	890.14
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 30 OF 44			
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. CMDI		M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 147.50
City FALLS CHURCH	State VA Zip Code 22043-2625	
Purpose of Disbursement BANK FEE	Category/Type 003	Transaction ID : SB17.I93
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District: 00		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. CMDI		M M / D D / Y Y Y Y 10 / 11 / 2011
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 0.63
City FALLS CHURCH	State VA Zip Code 22043-2625	
Purpose of Disbursement BANK FEE	Category/Type 003	Transaction ID : SB17.I99
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District: 00		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. COLE MEDIWORKS, LLC		M M / D D / Y Y Y Y 12 / 21 / 2011
Mailing Address 1326A PEARL LOOP		Amount of Each Disbursement this Period 2025.00
City LYNDEN	State WA Zip Code 98264-9196	
Purpose of Disbursement AUDIO/VISUAL SVC	Category/Type 006	Transaction ID : SB17.I153
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District: 00		

SUBTOTAL of Disbursements This Page (optional).....	2173.13
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 31 OF 44	
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. COSTCO		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2011
Mailing Address 4299 MERIDIAN ST		Amount of Each Disbursement this Period 24.17
City BELLINGHAM State WA Zip Code 98226-6475	Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	Transaction ID : SB17.I146

Full Name (Last, First, Middle Initial) B. ELAVON		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 1 CONCOURSE PKWY NE SUITE 300		Amount of Each Disbursement this Period 203.41
City ATLANTA State GA Zip Code 30328-5564	Purpose of Disbursement BANK FEE Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	Transaction ID : SB17.I159

Full Name (Last, First, Middle Initial) C. ELAVON		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2011
Mailing Address 1 CONCOURSE PKWY NE SUITE 300		Amount of Each Disbursement this Period 45.45
City ATLANTA State GA Zip Code 30328-5564	Purpose of Disbursement BANK FEE Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	Transaction ID : SB17.I160

SUBTOTAL of Disbursements This Page (optional).....	273.03
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 32 OF 44		
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. ELAVON		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2011
Mailing Address 1 CONCOURSE PKWY NE SUITE 300		Amount of Each Disbursement this Period 127.21 Transaction ID : SB17.I161
City ATLANTA State GA Zip Code 30328-5564	Purpose of Disbursement BANK FEE Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District: 00		

Full Name (Last, First, Middle Initial) B. IMAGINE DESIGN STUDIO		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2011
Mailing Address 424 W BAKERVIEW RD		Amount of Each Disbursement this Period 142.99 Transaction ID : SB17.I155
City BELLINGHAM State WA Zip Code 98226-8176	Purpose of Disbursement WEB SERVICE Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District: 00		

Full Name (Last, First, Middle Initial) C. IMAGINE DESIGN STUDIO		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2011
Mailing Address 424 W BAKERVIEW RD		Amount of Each Disbursement this Period 382.40 Transaction ID : SB17.I156
City BELLINGHAM State WA Zip Code 98226-8176	Purpose of Disbursement WEB SERVICE Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District: 00		

SUBTOTAL of Disbursements This Page (optional).....	652.60
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 33 OF 44			
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. IMAGINE DESIGN STUDIO			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2011
Mailing Address 424 W BAKERVIEW RD			Amount of Each Disbursement this Period 142.70
City BELLINGHAM	State WA	Zip Code 98226-8176	
Purpose of Disbursement WEB SERVICE		Candidate Name	Transaction ID : SB17.I157
Category/Type 001			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District: 00			

Full Name (Last, First, Middle Initial) B. MICROSOFT			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address 1 MICROSOFT WAY			Amount of Each Disbursement this Period 152.17
City REDMOND	State WA	Zip Code 98052-8300	
Purpose of Disbursement SOFTWARE		Candidate Name	Transaction ID : SB17.I116
Category/Type 001			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		SOFTWARE
State: District: 00			

Full Name (Last, First, Middle Initial) C. MICROSOFT			Date of Disbursement M M / D D / Y Y Y Y 11 / 25 / 2011
Mailing Address 1 MICROSOFT WAY			Amount of Each Disbursement this Period 163.00
City REDMOND	State WA	Zip Code 98052-8300	
Purpose of Disbursement SOFTWARE		Candidate Name	Transaction ID : SB17.I129
Category/Type 001			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District: 00			

SUBTOTAL of Disbursements This Page (optional).....	457.87
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 34 OF 44	
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. MICROSOFT		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2011
Mailing Address 1 MICROSOFT WAY		Amount of Each Disbursement this Period 86.91
City REDMOND	State WA	
Zip Code 98052-8300	Purpose of Disbursement SOFTWARE	Transaction ID : SB17.I142
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District: 00		

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2011
Mailing Address 4297 MERIDIAN ST		Amount of Each Disbursement this Period 114.43
City BELLINGHAM	State WA	
Zip Code 98226-6475	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I97
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District: 00		

Full Name (Last, First, Middle Initial) C. PAKMAIL		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address 2950 NEWMARKET ST		Amount of Each Disbursement this Period 42.00
City BELLINGHAM	State WA	
Zip Code 98226-3872	Purpose of Disbursement MAIL BOX RENTAL	Transaction ID : SB17.I105
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	MAIL BOX RENTAL
State: District: 00		

SUBTOTAL of Disbursements This Page (optional).....	243.34
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 35 OF 44			
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. POGOZONE INTERNET SERVICES		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2011
Mailing Address PO BOX 974		Amount of Each Disbursement this Period 174.10
City LYNDEN State WA Zip Code 98264-0974	Purpose of Disbursement WEB SERVICE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	Transaction ID : SB17.I120 [MEMO ITEM] BUSINESS WIRELESS INTERNET AND PHONE

Full Name (Last, First, Middle Initial) B. POGOZONE INTERNET SERVICES		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2011
Mailing Address PO BOX 974		Amount of Each Disbursement this Period 174.10
City LYNDEN State WA Zip Code 98264-0974	Purpose of Disbursement WEB SERVICE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	Transaction ID : SB17.I143 [MEMO ITEM] BUSINESS WIRELESS INTERNET AND PHONE

Full Name (Last, First, Middle Initial) C. POGOZONE INTERNET SERVICES		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address PO BOX 974		Amount of Each Disbursement this Period 359.81
City LYNDEN State WA Zip Code 98264-0974	Purpose of Disbursement WEB SERVICE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	Transaction ID : SB17.I92 [MEMO ITEM] BUSINESS WIRELESS INTERNET AND PHONE

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 36 OF 44	
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. POGOZONE INTERNET SERVICES		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2011
Mailing Address PO BOX 974		Amount of Each Disbursement this Period 65.00
City LYNDEN	State WA	Zip Code 98264-0974
Purpose of Disbursement WEB SERVICE	Category/ Type 001	
Candidate Name	Transaction ID : SB17.I98	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] BUSINESS WIRELESS INTERNET AND PHONE
State: District: 00		

Full Name (Last, First, Middle Initial) B. QUICKBOOKS		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2011
Mailing Address 2632 MARINE WAY		Amount of Each Disbursement this Period 21.70
City MOUNTAIN VIEW	State CA	Zip Code 94043-1126
Purpose of Disbursement WEB SERVICE	Category/ Type 001	
Candidate Name	Transaction ID : SB17.I101	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District: 00		

Full Name (Last, First, Middle Initial) C. QUICKBOOKS		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address 2632 MARINE WAY		Amount of Each Disbursement this Period 33.91
City MOUNTAIN VIEW	State CA	Zip Code 94043-1126
Purpose of Disbursement WEB SERVICE	Category/ Type 001	
Candidate Name	Transaction ID : SB17.I110	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District: 00		

SUBTOTAL of Disbursements This Page (optional).....	55.61
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 37 OF 44			
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. QUICKBOOKS		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2011
Mailing Address 2632 MARINE WAY		Amount of Each Disbursement this Period 21.70
City MOUNTAIN VIEW State CA Zip Code 94043-1126	Purpose of Disbursement WEB SERVICE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	Transaction ID : SB17.I119

Full Name (Last, First, Middle Initial) B. QUICKBOOKS		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2011
Mailing Address 2632 MARINE WAY		Amount of Each Disbursement this Period 33.91
City MOUNTAIN VIEW State CA Zip Code 94043-1126	Purpose of Disbursement WEB SERVICE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	Transaction ID : SB17.I132

Full Name (Last, First, Middle Initial) C. QUICKBOOKS		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2011
Mailing Address 2632 MARINE WAY		Amount of Each Disbursement this Period 21.70
City MOUNTAIN VIEW State CA Zip Code 94043-1126	Purpose of Disbursement WEB SERVICE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	Transaction ID : SB17.I141

SUBTOTAL of Disbursements This Page (optional).....	77.31
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 38 OF 44		
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. QUICKBOOKS		M M / D D / Y Y Y Y 12 / 29 / 2011
Mailing Address 2632 MARINE WAY		Amount of Each Disbursement this Period
City MOUNTAIN VIEW	State CA	94043-1126
Purpose of Disbursement WEB SERVICE	Category/ Type	33.91
Candidate Name	001	Transaction ID : SB17.I164
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	
State: District: 00	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. SAFETY SIGNS INC		M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 3857A HANNEGAN RD		Amount of Each Disbursement this Period
City BELLINGHAM	State WA	98226-9103
Purpose of Disbursement PRINTING	Category/ Type	897.52
Candidate Name	006	Transaction ID : SB17.I158
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	
State: District: 00	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. SECURITY SOLUTIONS		M M / D D / Y Y Y Y 11 / 29 / 2011
Mailing Address 1619 N STATE ST		Amount of Each Disbursement this Period
City BELLINGHAM	State WA	98225-4602
Purpose of Disbursement MAINTENANCE	Category/ Type	107.62
Candidate Name	001	Transaction ID : SB17.I131
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012	
State: District: 00	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1039.05
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 39 OF 44	
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. SPECIAL-T SIGNS		M M / D D / Y Y Y Y 10 / 11 / 2011	
Mailing Address 2206 PACIFIC ST		Amount of Each Disbursement this Period	
City BELLINGHAM State WA Zip Code 98229-5824		864.17	
Purpose of Disbursement PRINTING		Transaction ID : SB17.I100	
Candidate Name		Category/Type 006	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012	
State:	District: 00	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. SPRINT		M M / D D / Y Y Y Y 10 / 26 / 2011	
Mailing Address 3908 MERIDIAN ST SUITE 110		Amount of Each Disbursement this Period	
City BELLINGHAM State WA Zip Code 98226-5580		163.04	
Purpose of Disbursement PHONE SVC		Transaction ID : SB17.I108	
Candidate Name		Category/Type 001	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012	
State:	District: 00	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. SPRINT		M M / D D / Y Y Y Y 11 / 01 / 2011	
Mailing Address 3908 MERIDIAN ST SUITE 110		Amount of Each Disbursement this Period	
City BELLINGHAM State WA Zip Code 98226-5580		65.22	
Purpose of Disbursement PHONE SVC		Transaction ID : SB17.I115	
Candidate Name		Category/Type 001	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012	
State:	District: 00	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1092.43
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 40 OF 44			
	<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)
Anders for Congress

Full Name (Last, First, Middle Initial) A. SPRINT		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2011
Mailing Address 3908 MERIDIAN ST SUITE 110		Amount of Each Disbursement this Period 313.04
City BELLINGHAM	State WA	
Zip Code 98226-5580	Purpose of Disbursement PHONE SVC	Transaction ID : SB17.I126
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	MOBILE PHONE
State: District: 00		

Full Name (Last, First, Middle Initial) B. SPRINT		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2011
Mailing Address 3908 MERIDIAN ST SUITE 110		Amount of Each Disbursement this Period 54.35
City BELLINGHAM	State WA	
Zip Code 98226-5580	Purpose of Disbursement PHONE SVC	Transaction ID : SB17.I140
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District: 00		

Full Name (Last, First, Middle Initial) C. SPRINT		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2011
Mailing Address 3908 MERIDIAN ST SUITE 110		Amount of Each Disbursement this Period 198.33
City BELLINGHAM	State WA	
Zip Code 98226-5580	Purpose of Disbursement PHONE SVC	Transaction ID : SB17.I165
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District: 00		

SUBTOTAL of Disbursements This Page (optional).....	565.72
TOTAL This Period (last page this line number only).....	41405.51

**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 41 OF 44	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Anders for Congress

Full Name (Last, First, Middle Initial) A. GREG ANDERS		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2011
Mailing Address 2950 NEWMARKET ST		Amount of Each Disbursement this Period 10000.00 Transaction ID : SB19A.I169
City BELLINGHAM State WA Zip Code 98226-3872	Purpose of Disbursement LOAN REPAYMENT <input type="checkbox"/> 009 Category/ Type	
Candidate Name GREG ANDERS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: WA District: 02		

Full Name (Last, First, Middle Initial) B.		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	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:		

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	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).....	10000.00
TOTAL This Period (last page this line number only).....	10000.00

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Anders for Congress

Transaction ID : 1

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Greg Anders

Primary
 General
 Other (specify) ▼

Mailing Address

2950 Newmarket Place, #101-251

City

State

ZIP Code

Bellingham

WA

98226

Original Amount of Loan

10000.00

Cumulative Payment To Date

10000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

06 / 30 / 2011

Date Due

7/1/2012

Interest Rate

6.00 % (apr)

Secured:

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period 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
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Anders for Congress

Transaction ID : 2

LOAN SOURCE Full Name (Last, First, Middle Initial)
GREG ANDERS

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
2950 NEWMARKET ST, #101-251

City State ZIP Code
BELLINGHAM WA 98226-3872

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
177600.00 0.00 177600.00

TERMS

Date Incurred Date Due Interest Rate Secured:
09 / 30 / 2011 M M / D D / Y Y / 2012 Y 8.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 177600.00

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 Detailed Summary Page

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Anders for Congress

Transaction ID : 3

LOAN SOURCE Full Name (Last, First, Middle Initial)
GREG ANDERS

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
2950 NEWMARKET ST, #101-251

City State ZIP Code
BELLINGHAM WA 98226-3872

Original Amount of Loan 75000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 75000.00
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TERMS

Date Incurred: M 12 / D 30 / Y 2011
Date Due: M / D / Y 7/1/2012
Interest Rate: 8.00 % (apr)
Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	75000.00
TOTALS This Period (last page in this line only).....	252600.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.