

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5
POLLOCK FOR CONGRESS

ADDRESS (number and street) 1109 SW 1ST AVE STE F #412
 Check if different than previously reported. (ACC) CANBY **OR** 97013

2. **FEC IDENTIFICATION NUMBER** C C00551614 CITY STATE ZIP CODE STATE DISTRICT
3. IS THIS REPORT NEW (N) **OR** AMENDED (A) OR 05

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2014 through M M / D D / Y Y Y Y 03 / 31 / 2014

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

Type or Print Name of Treasurer BENJAMIN POLLOCK

Signature of Treasurer BENJAMIN POLLOCK [Electronically Filed] Date M M / D D / Y Y Y Y 06 / 30 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
POLLOCK 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))....	15283.79	59046.83
(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)).....	15283.79	59046.83
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	20163.45	37614.70
(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)).....	20163.45	37614.70
8. Cash on Hand at Close of Reporting Period (from Line 27).....	21432.13	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

POLLOCK 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).....	8000.00	47200.00
(ii) Unitemized.....	1485.98	3565.98
(iii) TOTAL of contributions from individuals ▶	9485.98	50765.98
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	5797.81	8280.85
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	15283.79	59046.83
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	15283.79	59046.83

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	20163.45	37614.70
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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) ►	20163.45	37614.70

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	26311.79
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	15283.79
25. SUBTOTAL (add Line 23 and Line 24).....	41595.58
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	20163.45
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	21432.13

**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 33
	<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)
POLLOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Staci Daamgard

Mailing Address PO Box 478

City Aurora State OR Zip Code 97002

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

Name of Employer Columbia Helicopters Occupation Finance Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2014

Transaction ID : SA11AI.4214

Amount of Each Receipt this Period
500.00

In-kind - Food and supplies for meet & greet

B. Full Name (Last, First, Middle Initial)
John Kuzmanich

Mailing Address 476 SW 150th Ave

City Beaverton State OR Zip Code 97006

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

Name of Employer Self Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2010.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : SA11AI.4378

Amount of Each Receipt this Period
2000.00

In-kind - General Campaign Consulting

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

Mailing Address 96-305 Kaloapau St.
#101

City Mililani State HI Zip Code 96789

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

Name of Employer US Army Occupation Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 06 / 2014

Transaction ID : SA11AI.4162

Amount of Each Receipt this Period
50.00

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

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

2550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 33
	<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)
POLLOCK FOR CONGRESS

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

Mailing Address 96-305 Kaloapau St.
#101

City Mililani State HI Zip Code 96789

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

Name of Employer US Army Occupation Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 30 / 2014

Transaction ID : SA11AI.4182

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Trudy Reusser

Mailing Address 3400 SE Hill Rd

City Oregon City State OR Zip Code 97267

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 11 / 2014

Transaction ID : SA11AI.4127

Amount of Each Receipt this Period
250.00

In-kind - Gift Basket for Meet & Greet

C. Full Name (Last, First, Middle Initial)
Trudy Reusser

Mailing Address 3400 SE Hill Rd

City Oregon City State OR Zip Code 97267

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **255.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 11 / 2014

Transaction ID : SA11AI.4221

Amount of Each Receipt this Period
5.00

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

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

305.00

**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 33
	<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)
POLLOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jeff Reynolds

Mailing Address 1025 NE 176th Ave

City Portland State OR Zip Code 97230

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

Name of Employer Self Occupation Freelance Writer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2055.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 15 / 2014

Transaction ID : SA11AI.4390

Amount of Each Receipt this Period
2000.00

In-kind - General Campaign Consulting

B. Full Name (Last, First, Middle Initial)
Seth Rydmark

Mailing Address 31944 S. Dryland Rd

City Molalla State OR Zip Code 97038

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

Name of Employer Providence Health and Services Occupation Mental Health Associate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11AI.4376

Amount of Each Receipt this Period
2500.00

In-kind - Field Data Analyst

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

Mailing Address 3015 Cole Ave.
#133

City Dallas State TX Zip Code 75204

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

Name of Employer Trinity Industries Occupation Marketing Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
295.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2014

Transaction ID : SA11AI.4109

Amount of Each Receipt this Period
145.00

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

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

4645.00

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

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

FOR LINE NUMBER: PAGE 8 OF 33
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
POLLOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Debbie Wright

Mailing Address 30921 S Stuwe Rd

City Canby State OR Zip Code 97013

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2014

Transaction ID : SA11Al.4229

Amount of Each Receipt this Period
 500.00

In-kind - supplies and venue for meet & greet

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).....

500.00

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 33
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
POLLOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BENJAMIN POLLOCK

Mailing Address 30480 SW BOONES FERRY RD #212

City: WILSONVILLE State: OR Zip Code: 97070

FEC ID number of contributing federal political committee: **C H4OR05213**

Name of Employer: SMS Auto Fabrics Occupation: VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 3183.04

Date of Receipt: 01 / 04 / 2014

Transaction ID : SA11D.4159

Amount of Each Receipt this Period: 700.00

In-kind - PumpAudio.com Radio Music License

B. Full Name (Last, First, Middle Initial)
BENJAMIN POLLOCK

Mailing Address 30480 SW BOONES FERRY RD #212

City: WILSONVILLE State: OR Zip Code: 97070

FEC ID number of contributing federal political committee: **C H4OR05213**

Name of Employer: SMS Auto Fabrics Occupation: VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 3208.04

Date of Receipt: 01 / 19 / 2014

Transaction ID : SA11D.4202

Amount of Each Receipt this Period: 25.00

In-kind - Campaign Phone

C. Full Name (Last, First, Middle Initial)
BENJAMIN POLLOCK

Mailing Address 30480 SW BOONES FERRY RD #212

City: WILSONVILLE State: OR Zip Code: 97070

FEC ID number of contributing federal political committee: **C H4OR05213**

Name of Employer: SMS Auto Fabrics Occupation: VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 3262.38

Date of Receipt: 01 / 20 / 2014

Transaction ID : SA11D.4191

Amount of Each Receipt this Period: 54.34

In-kind - TMobile Campaign Cell Phone Bill

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

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

779.34

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11D

Transaction ID : SA11D.4159

1/4/14 - \$700 - PumpAudio.com 5 Pine Street Tivoli NY, NY 12583 - Radio Advertising Music License Expense

Form/Schedule: SA11D

Transaction ID: SA11D.4202

1/19/14 - \$25 - Flrst Electronic Bank PO Box 760 Draper, UT 84020 - Campaign Phone Payment

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11D

Transaction ID : SA11D.4191

1/20/14 - \$54.34 - TMobile PO Box 51843 Los Angeles, CA 90051 - Campaign Cell Phone Bill

Form/Schedule:

Transaction ID:

**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 33
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
POLLOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BENJAMIN POLLOCK

Mailing Address 30480 SW BOONES FERRY RD #212

City: WILSONVILLE State: OR Zip Code: 97070

FEC ID number of contributing federal political committee: **C H4OR05213**

Name of Employer: SMS Auto Fabrics Occupation: VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **3362.38**

Date of Receipt: **01 / 31 / 2014**

Transaction ID : SA11D.4193

Amount of Each Receipt this Period: **100.00**

In-kind - Clackamas County Republican Party Lincoln Day Dinner

B. Full Name (Last, First, Middle Initial)
BENJAMIN POLLOCK

Mailing Address 30480 SW BOONES FERRY RD #212

City: WILSONVILLE State: OR Zip Code: 97070

FEC ID number of contributing federal political committee: **C H4OR05213**

Name of Employer: SMS Auto Fabrics Occupation: VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **3387.38**

Date of Receipt: **02 / 20 / 2014**

Transaction ID : SA11D.4204

Amount of Each Receipt this Period: **25.00**

In-kind - Campaign Phone

C. Full Name (Last, First, Middle Initial)
BENJAMIN POLLOCK

Mailing Address 30480 SW BOONES FERRY RD #212

City: WILSONVILLE State: OR Zip Code: 97070

FEC ID number of contributing federal political committee: **C H4OR05213**

Name of Employer: SMS Auto Fabrics Occupation: VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **3497.38**

Date of Receipt: **02 / 22 / 2014**

Transaction ID : SA11D.4235

Amount of Each Receipt this Period: **110.00**

In-kind - Dorchester Conference Ticket

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

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

235.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SA11D

Transaction ID : SA11D.4193

1/31/14 - \$100 - Clackamas County Republican Party 612 Molalla Ave Oregon City, OR 97045 - Lincoln Day Dinner Ticket

Form/Schedule: SA11D

Transaction ID: SA11D.4204

2/20/14 - \$25 - First Electronic Bank PO Box 760 Draper, UT 84020 - Campaign Phone Payment

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11D

Transaction ID : SA11D.4235

2/22/14 - \$110 - Dorchester Conference 4353 NW Tam O'Shanter Way Portland, OR 97229 - Conference Registration

Form/Schedule:

Transaction ID:

**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 33
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
POLLOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BENJAMIN POLLOCK

Mailing Address 30480 SW BOONES FERRY RD #212

City: WILSONVILLE State: OR Zip Code: 97070

FEC ID number of contributing federal political committee: **C H4OR05213**

Name of Employer: SMS Auto Fabrics Occupation: VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 4039.88

Date of Receipt: 02 / 22 / 2014

Transaction ID : SA11D.4236

Amount of Each Receipt this Period: 542.50

In-kind - Delta Airlines Airfare for DC Trip

B. Full Name (Last, First, Middle Initial)
BENJAMIN POLLOCK

Mailing Address 30480 SW BOONES FERRY RD #212

City: WILSONVILLE State: OR Zip Code: 97070

FEC ID number of contributing federal political committee: **C H4OR05213**

Name of Employer: SMS Auto Fabrics Occupation: VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 4094.36

Date of Receipt: 02 / 28 / 2014

Transaction ID : SA11D.4200

Amount of Each Receipt this Period: 54.48

In-kind - TMobile Campaign Cell Phone Bill

C. Full Name (Last, First, Middle Initial)
BENJAMIN POLLOCK

Mailing Address 30480 SW BOONES FERRY RD #212

City: WILSONVILLE State: OR Zip Code: 97070

FEC ID number of contributing federal political committee: **C H4OR05213**

Name of Employer: SMS Auto Fabrics Occupation: VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 6594.36

Date of Receipt: 03 / 13 / 2014

Transaction ID : SA11D.4183

Amount of Each Receipt this Period: 2500.00

In-kind - Oregon Secretary of State Voters Pamphlet Fee

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

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

3096.98

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11D

Transaction ID : SA11D.4236

2/22/14 - \$542.50 - Delta Airlines PO Box 20706 Atlanta, GA 30320 - Airfare for DC trip

Form/Schedule: SA11D

Transaction ID: SA11D.4200

2/28/14 - \$54.48 - TMobile PO Box 51843 Los Angeles, CA 90051 - Campaign Cell Phone Bill

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11D

Transaction ID : SA11D.4183

3/13/14 - \$2500 - Oregon Secretary of State Public Service Building Ste 501 255 Capitol St NE Salem OR 97310 - Voters Pamphlet Fee

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 33
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
POLLOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BENJAMIN POLLOCK

Mailing Address 30480 SW BOONES FERRY RD #212

City: WILSONVILLE State: OR Zip Code: 97070

FEC ID number of contributing federal political committee: **C H4OR05213**

Name of Employer: SMS Auto Fabrics Occupation: VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **6619.36**

Date of Receipt: **03 / 17 / 2014**

Transaction ID : SA11D.4206

Amount of Each Receipt this Period: **25.00**

In-kind - Campaign Phone

B. Full Name (Last, First, Middle Initial)
BENJAMIN POLLOCK

Mailing Address 30480 SW BOONES FERRY RD #212

City: WILSONVILLE State: OR Zip Code: 97070

FEC ID number of contributing federal political committee: **C H4OR05213**

Name of Employer: SMS Auto Fabrics Occupation: VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **7219.36**

Date of Receipt: **03 / 22 / 2014**

Transaction ID : SA11D.4240

Amount of Each Receipt this Period: **600.00**

In-kind - Tom Edwards Field Signs

C. Full Name (Last, First, Middle Initial)
BENJAMIN POLLOCK

Mailing Address 30480 SW BOONES FERRY RD #212

City: WILSONVILLE State: OR Zip Code: 97070

FEC ID number of contributing federal political committee: **C H4OR05213**

Name of Employer: SMS Auto Fabrics Occupation: VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **7573.35**

Date of Receipt: **03 / 26 / 2014**

Transaction ID : SA11D.4241

Amount of Each Receipt this Period: **353.99**

In-kind - Hotcards.com Campaign Literature

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

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

978.99

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11D

Transaction ID : SA11D.4206

3/17/14 - \$25 - First Electronic Bank PO Box 760 Draper, UT 84020 - Campaign Phone Payment

Form/Schedule: SA11D

Transaction ID: SA11D.4240

3/22/14 - \$600 - Tom Edwards 6043 Green Mountain Rd Woodland, WA 98674 - Field Signs

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11D

Transaction ID : SA11D.4241

3/26/14 - \$353.99 - Hotcards.com 2400 Superior Ave Cleveland, OH 44114 - Campaign Literature

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 33
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
POLLOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BENJAMIN POLLOCK

Mailing Address 30480 SW BOONES FERRY RD #212

City WILSONVILLE State OR Zip Code 97070

FEC ID number of contributing federal political committee. **C** H4OR05213

Name of Employer SMS Auto Fabrics Occupation VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8280.85

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11D.4242

Amount of Each Receipt this Period
707.50

In-kind - Tom Edwards Field Signs

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).....

707.50

5797.81

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11D

Transaction ID : SA11D.4242

3/27/14 - \$707.50 - Tom Edwards 6043 Green Mountain Rd Woodland, WA 98674 - Field Signs

Form/Schedule:

Transaction ID:

**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 33			
	<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)
POLLOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. American Strategies		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 1025 NE 176th Ave		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.4244
City Portland	State OR	
Zip Code 97230	Purpose of Disbursement Political Consulting Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. American Strategies		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 1025 NE 176th Ave		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.4245
City Portland	State OR	
Zip Code 97230	Purpose of Disbursement Political Consulting Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. American Strategies		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 1025 NE 176th Ave		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4246
City Portland	State OR	
Zip Code 97230	Purpose of Disbursement Political Consulting Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3500.00
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 24 OF 33	
	<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)
POLLOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Staci Daamgard		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2014
Mailing Address PO Box 478		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4247
City Aurora	State OR	
Zip Code 97002	Purpose of Disbursement In-kind - Food and supplies for meet & greet	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Facebook, Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 1601 Willow Rd.		Amount of Each Disbursement this Period 89.48 Transaction ID : SB17.4249
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Online Advertising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Facebook, Inc.		Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014
Mailing Address 1601 Willow Rd.		Amount of Each Disbursement this Period 581.03 Transaction ID : SB17.4250
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Online Advertising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1170.03
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 25 OF 33		
	<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)
POLLOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Facebook, Inc.		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 1601 Willow Rd.		Amount of Each Disbursement this Period 385.06 Transaction ID : SB17.4251
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Online Advertising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Facebook, Inc.		Date of Disbursement MM / DD / YYYY 03 / 14 / 2014
Mailing Address 1601 Willow Rd.		Amount of Each Disbursement this Period 11.94 Transaction ID : SB17.4252
City Menlo Park	State CA	
Zip Code 94025	Purpose of Disbursement Online Advertising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Good Impressions Printing		Date of Disbursement MM / DD / YYYY 03 / 27 / 2014
Mailing Address 7112 NE Emerson St		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.4254
City Portland	State OR	
Zip Code 97218	Purpose of Disbursement Campaign Literature Printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	385.06
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 33			
	<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)
POLLOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Google Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014
Mailing Address Dept 33654 PO Box 39000		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4256
City San Francisco	State CA Zip Code 94139	
Purpose of Disbursement Online Advertising	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Google Inc.		Date of Disbursement M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address Dept 33654 PO Box 39000		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.4257
City San Francisco	State CA Zip Code 94139	
Purpose of Disbursement Online Advertising	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Google Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014
Mailing Address Dept 33654 PO Box 39000		Amount of Each Disbursement this Period 163.27 Transaction ID : SB17.4258
City San Francisco	State CA Zip Code 94139	
Purpose of Disbursement Online Advertising	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1163.27
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 33	
	<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)
POLLOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. John Kuzmanich		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2014
Mailing Address 476 SW 150th Ave		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4379
City Beaverton	State OR	
Zip Code 97006	Purpose of Disbursement In-kind - General Campaign Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. KYKN Radio		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2014
Mailing Address PO Box 1430		Amount of Each Disbursement this Period 325.00 Transaction ID : SB17.4261
City Salem	State OR	
Zip Code 97308	Purpose of Disbursement Radio Advertising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. BENJAMIN POLLOCK		Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2014
Mailing Address 30480 SW BOONES FERRY RD #212		Amount of Each Disbursement this Period 700.00 Transaction ID : SB17.4161
City WILSONVILLE	State OR	
Zip Code 97070	Purpose of Disbursement In-kind - PumpAudio.com Radio Music License	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: OR District: 05	

SUBTOTAL of Disbursements This Page (optional).....	3025.00
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 28 OF 33	
	<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)
POLLOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BENJAMIN POLLOCK		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2014
Mailing Address 30480 SW BOONES FERRY RD #212		Amount of Each Disbursement this Period 25.00
City WILSONVILLE	State OR	
Zip Code 97070	Purpose of Disbursement In-kind - Campaign Phone	Transaction ID : SB17.4203
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OR	District: 05	

Full Name (Last, First, Middle Initial) B. BENJAMIN POLLOCK		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2014
Mailing Address 30480 SW BOONES FERRY RD #212		Amount of Each Disbursement this Period 54.34
City WILSONVILLE	State OR	
Zip Code 97070	Purpose of Disbursement In-kind - TMobile Campaign Cell Phone Bill	Transaction ID : SB17.4192
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OR	District: 05	

Full Name (Last, First, Middle Initial) C. BENJAMIN POLLOCK		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 30480 SW BOONES FERRY RD #212		Amount of Each Disbursement this Period 100.00
City WILSONVILLE	State OR	
Zip Code 97070	Purpose of Disbursement In-kind - Clackamas County Republican Party Lincoln Day Dinner	Transaction ID : SB17.4195
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OR	District: 05	

SUBTOTAL of Disbursements This Page (optional).....	179.34
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 29 OF 33	
	<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)
POLLOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BENJAMIN POLLOCK		Date of Disbursement M M / D D / Y Y Y Y 02 / 20 / 2014
Mailing Address 30480 SW BOONES FERRY RD #212		Amount of Each Disbursement this Period 677.50 Transaction ID : SB17.4205
City WILSONVILLE State OR Zip Code 97070	Purpose of Disbursement In-kind - Campaign Phone	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. BENJAMIN POLLOCK		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2014
Mailing Address 30480 SW BOONES FERRY RD #212		Amount of Each Disbursement this Period 110.00 Transaction ID : SB17.4267
City WILSONVILLE State OR Zip Code 97070	Purpose of Disbursement In-kind - Dorchester Conference Ticket	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. BENJAMIN POLLOCK		Date of Disbursement M M / D D / Y Y Y Y 02 / 22 / 2014
Mailing Address 30480 SW BOONES FERRY RD #212		Amount of Each Disbursement this Period 542.50 Transaction ID : SB17.4268
City WILSONVILLE State OR Zip Code 97070	Purpose of Disbursement In-kind - Delta Airlines Airfare for DC Trip	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 05	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	677.50
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 30 OF 33	
	<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)
POLLOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BENJAMIN POLLOCK		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 30480 SW BOONES FERRY RD #212		Amount of Each Disbursement this Period 54.48
City WILSONVILLE	State OR	
Zip Code 97070	Purpose of Disbursement In-kind - TMobile Campaign Cell Phone Bill	Transaction ID : SB17.4201
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OR	District: 05	

Full Name (Last, First, Middle Initial) B. BENJAMIN POLLOCK		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 30480 SW BOONES FERRY RD #212		Amount of Each Disbursement this Period 2500.00
City WILSONVILLE	State OR	
Zip Code 97070	Purpose of Disbursement In-kind - Oregon Secretary of State Voters Pamphlet Fee	Transaction ID : SB17.4184
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OR	District: 05	

Full Name (Last, First, Middle Initial) C. BENJAMIN POLLOCK		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 30480 SW BOONES FERRY RD #212		Amount of Each Disbursement this Period 25.00
City WILSONVILLE	State OR	
Zip Code 97070	Purpose of Disbursement In-kind - Campaign Phone	Transaction ID : SB17.4207
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OR	District: 05	

SUBTOTAL of Disbursements This Page (optional).....	2579.48
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 33		
	<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)
POLLOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BENJAMIN POLLOCK		Date of Disbursement M M / D D / Y Y Y Y 03 / 22 / 2014
Mailing Address 30480 SW BOONES FERRY RD #212		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.4272
City WILSONVILLE	State OR	
Zip Code 97070	Purpose of Disbursement In-kind - Tom Edwards Field Signs	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OR	District: 05	

Full Name (Last, First, Middle Initial) B. BENJAMIN POLLOCK		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 30480 SW BOONES FERRY RD #212		Amount of Each Disbursement this Period 353.99 Transaction ID : SB17.4273
City WILSONVILLE	State OR	
Zip Code 97070	Purpose of Disbursement In-kind - Hotcards.com Campaign Literature	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OR	District: 05	

Full Name (Last, First, Middle Initial) C. BENJAMIN POLLOCK		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 30480 SW BOONES FERRY RD #212		Amount of Each Disbursement this Period 707.50 Transaction ID : SB17.4274
City WILSONVILLE	State OR	
Zip Code 97070	Purpose of Disbursement In-kind - Tom Edwards Field Signs	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: OR	District: 05	

SUBTOTAL of Disbursements This Page (optional).....	1661.49
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 33	
	<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)
POLLOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Trudy Reusser		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 3400 SE Hill Rd		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.4129
City Oregon City	State OR	
Purpose of Disbursement In-kind - Gift Basket for Meet & Greet		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Jeff Reynolds		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2014
Mailing Address 1025 NE 176th Ave		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4391
City Portland	State OR	
Purpose of Disbursement In-kind - General Campaign Consulting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Seth Rydmark		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 31944 S. Dryland Rd		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.4377
City Molalla	State OR	
Purpose of Disbursement In-kind - Field Data Analyst		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)	4750.00
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 33 OF 33	
	<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)
POLLOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Debbie Wright		Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2014
Mailing Address 30921 S Stuwe Rd		Amount of Each Disbursement this Period 500.00
City Canby	State OR	
Zip Code 97013	Purpose of Disbursement In-kind - supplies and venue for meet & greet	Transaction ID : SB17.4278
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

SUBTOTAL of Disbursements This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	19591.65