

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

BOB DINGETHAL FOR CONGRESS

ADDRESS (number and street) ▼

PO Box 668

Check if different than previously reported. (ACC)

Vancouver

WA

98666

2. **FEC IDENTIFICATION NUMBER** ▼

C C00553818

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

WA

03

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 / / in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Marsha Manning

Signature of Treasurer Marsha Manning

[Electronically Filed]

Date

/ /

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

BOB DINGETHAL 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))....	46501.64	94219.44
(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)).....	46501.64	94219.44
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	36201.41	74224.70
(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)).....	36201.41	74224.70
8. Cash on Hand at Close of Reporting Period (from Line 27).....	22370.69	
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).....	2375.95	

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

BOB DINGETHAL 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).....	32851.97	69096.16
(ii) Unitemized.....	13519.00	24942.61
(iii) TOTAL of contributions from individuals ▶	46370.97	94038.77
(b) Political Party Committees.....	130.67	130.67
(c) Other Political Committees (such as PACs).....	0.00	50.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	46501.64	94219.44
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	2375.95
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	2375.95
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)..... ▶	46501.64	96595.39

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	36201.41	74224.70
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) ►	36201.41	74224.70

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	12070.46
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	46501.64
25. SUBTOTAL (add Line 23 and Line 24).....	58572.10
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	36201.41
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	22370.69

**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 52
	<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	

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

NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
20th Leg Dist Democratic Committee

Mailing Address 1516 Sunset Way

City Centralia State WA Zip Code 98531

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 12 / 2014

Transaction ID : SA11AI.5284

Amount of Each Receipt this Period
 800.00

B. Full Name (Last, First, Middle Initial)
BCTGM International Union PAC

Mailing Address 10401 Connecticut Ave

City Kensington State MD Zip Code 20895

FEC ID number of contributing federal political committee. **C C00127621**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11AI.5070

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
David Beckley

Mailing Address 3210 SE 154th Ave

City Vancouver State WA Zip Code 98683

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

Name of Employer Occupation
 None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 16 / 2014

Transaction ID : SA11AI.5080

Amount of Each Receipt this Period
 100.00

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

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

1900.00

**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 52
	<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)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
David Beckley

Mailing Address 3210 SE 154th Ave

City Vancouver State WA Zip Code 98683

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **252.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 10 / 2014

Transaction ID : SA11AI.5246

Amount of Each Receipt this Period
27.00

B. Full Name (Last, First, Middle Initial)
David Bennett

Mailing Address 5900 Buena Vista Dr

City Vancouver State WA Zip Code 98661

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

Name of Employer Rebound Orthopedics Occupation Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.5382

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Jonathan Blitt

Mailing Address 51 Commerce St

City Springfield State NJ Zip Code 07081

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

Name of Employer Aztec Software Occupation Educational Software

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
05 / 30 / 2014

Transaction ID : SA11AI.5133

Amount of Each Receipt this Period
500.00

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

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

777.00

**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 52
	<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)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Betty Jo Brewer

Mailing Address 1240 Sycamore Place

City Longview State WA Zip Code 98632

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
 04 / 11 / 2014

Transaction ID : SA11AI.4922

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Carolyn A Brock

Mailing Address 893 Middle Fork Rd

City Onolaska State WA Zip Code 98570

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 12 / 2014

Transaction ID : SA11AI.5279

Amount of Each Receipt this Period
 50.00

C. Full Name (Last, First, Middle Initial)
Matthew A Brock

Mailing Address 893 Middle Fork Rd

City Onolaska State WA Zip Code 98570

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

Name of Employer Boeing Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 12 / 2014

Transaction ID : SA11AI.5278

Amount of Each Receipt this Period
 50.00

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

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

600.00

**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 52
	<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)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Steven Busick

Mailing Address 415 Cedar St

City Vancouver State WA Zip Code 98661

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014

Transaction ID : SA11AI.5058

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Ed Cote

Mailing Address 4608 NW Olive St

City Vancouver State WA Zip Code 98663

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11AI.5375

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Cowlitz County Democratic Womens Club

Mailing Address 106 NW 8TH AVE

City Kelson State WA Zip Code 98636

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 05 / 2014

Transaction ID : SA11AI.5236

Amount of Each Receipt this Period
 500.00

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

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

1100.00

**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 52
	<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)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BOB E DINGETHAL

Mailing Address 17811 NW 56TH AVE

City State Zip Code
RIDGEFIELD WA 98642

FEC ID number of contributing federal political committee. **C** H4WA03114

Name of Employer Occupation
Gifford Pinchot Task Force Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5815.58

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.6400

Amount of Each Receipt this Period
742.19

In-kind - Bob - travel & mtgs - 2nd Qtr

B. Full Name (Last, First, Middle Initial)
Dona Dingethal

Mailing Address 17811 NW 56th Ave

City State Zip Code
Ridgefield WA 98642

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

Name of Employer Occupation
Korab USA LLC Customer Service

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
305.78

Date of Receipt
M M / D D / Y Y Y Y
06 / 14 / 2014

Transaction ID : SA11AI.6428

Amount of Each Receipt this Period
275.78

In-kind - food for volunteer event

C. Full Name (Last, First, Middle Initial)
Morris Foutch

Mailing Address 12513 NW 20th Ave

City State Zip Code
Vancouver WA 98685

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
625.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 11 / 2014

Transaction ID : SA11AI.5263

Amount of Each Receipt this Period
600.00

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

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

1617.97

**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 52
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jim Gizzi		Date of Receipt M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 6804 NE 209th St		Transaction ID : SA11AI.5109
City Battle Ground	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Realtor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Peter Harrison		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 10006 NE 36th Ct		Transaction ID : SA11AI.5483
City Vancouver	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Self	Occupation Writer-Consultant	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1095.00	

Full Name (Last, First, Middle Initial) C. Peter Harrison		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 10006 NE 36th Ct		Transaction ID : SA11AI.5542
City Vancouver	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1400.00
Name of Employer Self	Occupation Writer-Consultant	In-kind - research & writing
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2495.00	

SUBTOTAL of Receipts This Page (optional).....	1950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 52
	<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)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Matthew Herring

Mailing Address 10008 NE 144th Ave

City Vancouver State WA Zip Code 98682

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

Name of Employer UL LLC Occupation Mgr

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 16 / 2014

Transaction ID : SA11AI.5083

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
IBEW PAC Voluntary Fund

Mailing Address 900 Seventh St NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 18 / 2014

Transaction ID : SA11AI.4932

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
IBEW PAC Voluntary Fund

Mailing Address 900 Seventh St NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 18 / 2014

Transaction ID : SA11AI.5343

Amount of Each Receipt this Period
 1500.00

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

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

2750.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 12 OF 52

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Maria Joell

Mailing Address 16516 NE 27th Court

City State Zip Code
 Ridgefield WA 98642

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

Name of Employer Occupation
 ManorCare RN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 30 / 2014

Transaction ID : SA11AI.5130

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Maria Joell

Mailing Address 16516 NE 27th Court

City State Zip Code
 Ridgefield WA 98642

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

Name of Employer Occupation
 ManorCare RN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 308.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : SA11AI.5354

Amount of Each Receipt this Period
 58.00

C. Full Name (Last, First, Middle Initial)
Wesley Johnson

Mailing Address 2 Alpine Pl

City State Zip Code
 Longview WA 98632

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

Name of Employer Occupation
 Self Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2014

Transaction ID : SA11AI.5368

Amount of Each Receipt this Period
 500.00

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

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

658.00

**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 13 OF 52
	<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)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
David Kaufman

Mailing Address 208 Via La Circula

City Redondo Beach State CA Zip Code 90277

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

Name of Employer David Kaufman Painting & Decor Occupation Painter

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 30 / 2014

Transaction ID : SA11AI.5124

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Suzanne Kendall

Mailing Address 3808 SE 142nd Ct

City Vancouver State WA Zip Code 98683

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2400.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 18 / 2014

Transaction ID : SA11AI.5336

Amount of Each Receipt this Period
2400.00

C. Full Name (Last, First, Middle Initial)
David Koch

Mailing Address 11611 NW 43rd Ct

City Vancouver State WA Zip Code 98685

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 18 / 2014

Transaction ID : SA11AI.5338

Amount of Each Receipt this Period
125.00

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

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

2775.00

**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 52
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sudhakar Kudva		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 14608 NE 26th Ave		Transaction ID : SA11AI.5424	
City Vancouver	State WA	Zip Code 98686	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer Self	Occupation Engineer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. James Lee		Date of Receipt M M / D D / Y Y Y Y 06 / 10 / 2014	
Mailing Address 14516 NW 20th Ave		Transaction ID : SA11AI.5258	
City Vancouver	State WA	Zip Code 98685	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 270.00	
Name of Employer Automated Data Processing	Occupation Systems Engineer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 520.00		

Full Name (Last, First, Middle Initial) C. Lewis County Democratic Central Committee		Date of Receipt M M / D D / Y Y Y Y 06 / 12 / 2014	
Mailing Address 417 N Pearl St, Ste 9		Transaction ID : SA11AI.5267	
City Centralia	State WA	Zip Code 98531	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	1520.00
TOTAL This Period (last page this line number only).....	1520.00

**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 52
	<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)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jonathan Lovegrove

Mailing Address PO Box 463

City State Zip Code
Yacolt WA 98675

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

Name of Employer Occupation
IND Ilc Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 16 / 2014

Transaction ID : SA11AI.5318

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Marsha Manning

Mailing Address 3801 NE 172nd Ave

City State Zip Code
Vancouver WA 98682

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

Name of Employer Occupation
Self Accounting & Consulting

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2014

Transaction ID : SA11AI.5011

Amount of Each Receipt this Period
400.00

In-kind - accounting

C. Full Name (Last, First, Middle Initial)
Marsha Manning

Mailing Address 3801 NE 172nd Ave

City State Zip Code
Vancouver WA 98682

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

Name of Employer Occupation
Self Accounting & Consulting

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1700.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 30 / 2014

Transaction ID : SA11AI.5146

Amount of Each Receipt this Period
400.00

In-kind - Accounting

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

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

1050.00

**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 16 OF 52
	<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)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Marsha Manning

Mailing Address 3801 NE 172nd Ave

City Vancouver State WA Zip Code 98682

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

Name of Employer Self Occupation Accounting & Consulting

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11AI.5551

Amount of Each Receipt this Period
400.00

In-kind - Accounting

B. Full Name (Last, First, Middle Initial)
Maria's Properties

Mailing Address 10013 Hwy 99

City Vancouver State WA Zip Code 98665

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2014

Transaction ID : SA11AI.5544

Amount of Each Receipt this Period
600.00

In-kind - Office Rent

C. Full Name (Last, First, Middle Initial)
Maria's Properties

Mailing Address 10013 Hwy 99

City Vancouver State WA Zip Code 98665

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2014

Transaction ID : SA11AI.5546

Amount of Each Receipt this Period
600.00

In-kind - Office rent

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

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

1600.00

**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 17 OF 52
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Maria's Properties		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 10013 Hwy 99		Transaction ID : SA11AI.5547
City Vancouver	State WA	Zip Code 98665
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 600.00 In-kind - Office rent	
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1800.00	

Full Name (Last, First, Middle Initial) B. Linda McLain		Date of Receipt M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 7410 NW 16th Ave		Transaction ID : SA11AI.5102
City Vancouver	State WA	Zip Code 98665
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Currie & McLain P.S.	Occupation CPA	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Betty Sue Morris		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 12633 NW 19th Loop		Transaction ID : SA11AI.5383
City Vancouver	State WA	Zip Code 98685
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00	

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 52
	<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	

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

NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Catherine Morton

Mailing Address 2698 N L St

City Washougal State WA Zip Code 98671

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

Name of Employer Self Occupation Counselor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11AI.5044

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Dan Ogden

Mailing Address 2916 NE 88th Ct

City Vancouver State WA Zip Code 98662

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11AI.5072

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Ann Palenshus

Mailing Address 17111 NW 69th Ave

City Ridgefield State WA Zip Code 98642

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

Name of Employer Bubba Blue BBQ Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.5076

Amount of Each Receipt this Period
 750.00

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

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

1500.00

**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 19 OF 52
	<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)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
David Palenshus

Mailing Address 17111 NW 69th Ave

City Ridgefield State WA Zip Code 98642

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

Name of Employer Bubba Blue BBQ Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11AI.5077

Amount of Each Receipt this Period
750.00

B. Full Name (Last, First, Middle Initial)
Paradise Truck Stop

Mailing Address 2814 319th St NW

City Ridgefield State WA Zip Code 98642

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 18 / 2014

Transaction ID : SA11AI.5325

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Angela Pond

Mailing Address 9011 NE 312 Ave

City Camas State WA Zip Code 98607

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

Name of Employer Dept of Veterans Affairs Occupation Audiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11AI.5392

Amount of Each Receipt this Period
200.00

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

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

1450.00

**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 20 OF 52
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Katherine Radeka		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address PO Box 859		Transaction ID : SA11AI.5422	
City Camas	State WA	Zip Code 98607	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Whittier Consulting Group	Occupation Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) B. Ernest Santner		Date of Receipt M M / D D / Y Y Y Y 04 / 14 / 2014	
Mailing Address 14609 NE 7th St		Transaction ID : SA11AI.4951	
City Vancouver	State WA	Zip Code 98684	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) C. Honna Sheffield		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 2211 Kueffles Rd		Transaction ID : SA11AI.5484	
City Skamania	State WA	Zip Code 98648	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Self	Occupation Potter		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 270.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 600.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 52
	<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)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Eulalia Soto

Mailing Address 11100 NE 11th Ave

City Vancouver State WA Zip Code 98685

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2014

Transaction ID : SA11AI.5359

Amount of Each Receipt this Period
 700.00

B. Full Name (Last, First, Middle Initial)
Michael Turnauer

Mailing Address 18809 SE 17th St

City Vancouver State WA Zip Code 98683

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

Name of Employer Daimler Trucks North America Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11AI.5505

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Suzanne Turnauer

Mailing Address 18809 SE 17th St

City Vancouver State WA Zip Code 98683

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2014

Transaction ID : SA11AI.5506

Amount of Each Receipt this Period
 100.00

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

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

900.00

**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 22 OF 52		
	<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)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
UA Political Education Committee

Mailing Address 3 Park Place

City State Zip Code
Annapolis MD 21401

FEC ID number of contributing federal political committee. **C** C00012476

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : SA11AI.4930

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
United Food and Commercial Workers International Union Active Ballot Club

Mailing Address 1775 K STREET N.W.

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00002766

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2014

Transaction ID : SA11AI.5357

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Stefanos Vertopoulos

Mailing Address 18616 SE 14th Cir

City State Zip Code
Vancouver WA 98663

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

Name of Employer Occupation
Stefanos Vertopoulos & Assoc Insurance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
304.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2014

Transaction ID : SA11AI.5245

Amount of Each Receipt this Period
54.00

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

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

7554.00

**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 23 OF 52
	<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)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Stefanos Vertopoulos

Mailing Address 18616 SE 14th Cir

City Vancouver State WA Zip Code 98663

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

Name of Employer Stefanos Vertopoulos & Assoc Occupation Insurance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **354.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 30 / 2014

Transaction ID : SA11AI.5492

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Robert Volker

Mailing Address 226 Canyon Woods Way Apt A

City San Ramon State CA Zip Code 94582

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

Name of Employer Praxis Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 17 / 2014

Transaction ID : SA11AI.5322

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Jerry Wallace

Mailing Address 110 Krestview Lane

City Woodland State WA Zip Code 98674

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

Name of Employer WTB, Inc Occupation Construction

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 12 / 2014

Transaction ID : SA11AI.5264

Amount of Each Receipt this Period
50.00

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

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

1100.00

**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 24 OF 52
	<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)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Miranda Wecker

Mailing Address PO Box 160

City Naselle State WA Zip Code 98638

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

Name of Employer Univ of Washington Occupation Dir Research Program

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
 06 / 12 / 2014

Transaction ID : SA11AI.5286

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Julie Anne Williams

Mailing Address 2716 NW 104th St

City Vancouver State WA Zip Code 98685

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

Name of Employer Self Occupation Senior Care

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
 06 / 27 / 2014

Transaction ID : SA11AI.5373

Amount of Each Receipt this Period
250.00

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

32851.97

**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 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ADCO		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 353 Grand Blvd		Amount of Each Disbursement this Period 298.11 Transaction ID : SB17.5150
City Vancouver	State WA	
Purpose of Disbursement Printing - flyers	Category/ Type 006	
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA	District: 03	

Full Name (Last, First, Middle Initial) B. Brickhouse Bar & Grill		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 109 W 15th St		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.6418 [MEMO ITEM]
City Vancouver	State WA	
Purpose of Disbursement Bob In-kind 2nd Qtr - food for event	Category/ Type 007	
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA	District: 03	

Full Name (Last, First, Middle Initial) c. Bubba Blue BBQ		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 17111 NW 69th Ave		Amount of Each Disbursement this Period 1110.60 Transaction ID : SB17.4974
City Ridgefield	State WA	
Purpose of Disbursement Food/catering	Category/ Type 007	
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).....	1408.71
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 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Burgerville		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2014
Mailing Address 600 W Main St		Amount of Each Disbursement this Period 18.28
City Kelso State WA Zip Code 98626	Purpose of Disbursement Bob In-kind 2nd Qtr - food in Kelso	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6406 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 002		

Full Name (Last, First, Middle Initial) B. Burnt Bridge Cellars		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 1500 Broadway		Amount of Each Disbursement this Period 95.39
City Vancouver State WA Zip Code 98663	Purpose of Disbursement Dona In-kind vol event - wine	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6434 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 007		

Full Name (Last, First, Middle Initial) c. Butler Garage		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 114 James St		Amount of Each Disbursement this Period 12.00
City Seattle State WA Zip Code 98104	Purpose of Disbursement Bob In-kind 2nd Qtr - parking	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6404 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 002		

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 27 OF 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Carousel Cleaners		Date of Disbursement MM / DD / YYYY 06 / 10 / 2014
Mailing Address 13023 NE Hwy 99 #9		Amount of Each Disbursement this Period 15.01
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement Bob In-kind 2nd Qtr - dry cleaning	Transaction ID : SB17.6420 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 003	
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: WA	District: 03	

Full Name (Last, First, Middle Initial) B. Carousel Cleaners		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address 13023 NE Hwy 99 #9		Amount of Each Disbursement this Period 30.46
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement Bob In-kind 2nd Qtr - dry cleaning	Transaction ID : SB17.6422 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 003	
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: WA	District: 03	

Full Name (Last, First, Middle Initial) c. Carousel Cleaners		Date of Disbursement MM / DD / YYYY 06 / 13 / 2014
Mailing Address 13023 NE Hwy 99 #9		Amount of Each Disbursement this Period 6.99
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement Bob In-kind 2nd Qtr - dry cleaning	Transaction ID : SB17.6423 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 003	
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: WA	District: 03	

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 28 OF 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Cash & Carry		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 10611 NE 53rd St		Amount of Each Disbursement this Period 78.76
City Vancouver	State WA	
Zip Code 98662	Purpose of Disbursement Parade candy	Transaction ID : SB17.5529
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 001	
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: WA District: 03		

Full Name (Last, First, Middle Initial) B. Chevron		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 12105 N Jantzen Beach Ave		Amount of Each Disbursement this Period 46.15
City Portland	State OR	
Zip Code 97217	Purpose of Disbursement Bob In-kind 2nd Qtr - gas	Transaction ID : SB17.6412
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 002	
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)	[MEMO ITEM]
State: WA District: 03		

Full Name (Last, First, Middle Initial) c. City of Portland		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2014
Mailing Address 1120 SW Fifth Ave, Ste 800		Amount of Each Disbursement this Period 1.60
City Portland	State OR	
Zip Code 97204	Purpose of Disbursement Bob In-kind 2nd Qtr - parking	Transaction ID : SB17.6411
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 002	
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)	[MEMO ITEM]
State: WA District: 03		

SUBTOTAL of Disbursements This Page (optional).....	78.76
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 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. City of Vancouver		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2014
Mailing Address 415 W 6th St		Amount of Each Disbursement this Period 1.00
City Vancouver	State WA	
Zip Code 98660	Purpose of Disbursement Bob In-kind 2nd Qtr - parking	Transaction ID : SB17.6424 [MEMO ITEM]
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 002	
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: WA District: 03		

Full Name (Last, First, Middle Initial) B. Comcast		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address PO Box 34227		Amount of Each Disbursement this Period 686.67
City Seattle	State WA	
Zip Code 98124	Purpose of Disbursement Phone & Internet	Transaction ID : SB17.4963
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 001	
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: WA District: 03		

Full Name (Last, First, Middle Initial) c. Comcast		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address PO Box 34227		Amount of Each Disbursement this Period 296.22
City Seattle	State WA	
Zip Code 98124	Purpose of Disbursement Internet service	Transaction ID : SB17.5520
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 001	
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: WA District: 03		

SUBTOTAL of Disbursements This Page (optional).....	982.89
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 52			
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Tom Desmond		Date of Disbursement MM / DD / YYYY 05 / 02 / 2014
Mailing Address 10506 NE 37th Ave		Amount of Each Disbursement this Period 420.00 Transaction ID : SB17.5159
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement Contract fee	Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA District: 03	

Full Name (Last, First, Middle Initial) B. Tom Desmond		Date of Disbursement MM / DD / YYYY 06 / 03 / 2014
Mailing Address 10506 NE 37th Ave		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.5519
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement Staff	Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA District: 03	

Full Name (Last, First, Middle Initial) c. Tom Desmond		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 10506 NE 37th Ave		Amount of Each Disbursement this Period 117.54 Transaction ID : SB17.5535
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement Travel expense	Category/ Type 002
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA District: 03	

SUBTOTAL of Disbursements This Page (optional).....	1037.54
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 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BOB E DINGETHAL		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 17811 NW 56TH AVE		Amount of Each Disbursement this Period 742.19 Transaction ID : SB17.6401
City RIDGEFIELD	State WA	
Zip Code 98642	Purpose of Disbursement In-kind - Bob - travel & mtgs - 2nd Qtr	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: WA District: 03	

Full Name (Last, First, Middle Initial) B. Dona Dingethal		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2014
Mailing Address 17811 NW 56th Ave		Amount of Each Disbursement this Period 275.78 Transaction ID : SB17.6429
City Ridgefield	State WA	
Zip Code 98642	Purpose of Disbursement In-kind - food for volunteer event	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. Einstein Bros Bagels		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 224 Broadway East		Amount of Each Disbursement this Period 6.06 Transaction ID : SB17.6405 [MEMO ITEM]
City Portland	State OR	
Zip Code 97211	Purpose of Disbursement Bob In-kind 2nd Qtr - travel food	Category/ Type 002
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA District: 03	

SUBTOTAL of Disbursements This Page (optional).....	1017.97
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 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Fred Meyer - Hazel Dell		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 7700 Hwy 99		Amount of Each Disbursement this Period 7.47
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Dona In-kind vol event - paper products	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6431 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 007		

Full Name (Last, First, Middle Initial) B. Fred Meyer - Hazel Dell		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2014
Mailing Address 7700 Hwy 99		Amount of Each Disbursement this Period 29.94
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Dona In-kind vol event - food	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6430 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 007		

Full Name (Last, First, Middle Initial) c. Fred Meyer - Tumwater		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 555 Trosper Rd SW		Amount of Each Disbursement this Period 48.96
City Tumwater State WA Zip Code 98512	Purpose of Disbursement Bob In-kind 2nd Qtr - gas	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6416 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 002		

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 33 OF 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Peter Harrison		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 10006 NE 36th Ct		Amount of Each Disbursement this Period 1400.00 Transaction ID : SB17.5543
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement In-kind - research & writing	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. Home Depot		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2014
Mailing Address 8601 NE Andresen Rd		Amount of Each Disbursement this Period 85.89 Transaction ID : SB17.5181
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Sign materials	Category/ Type 004
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA District: 03		

Full Name (Last, First, Middle Initial) c. Home Depot		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 8601 NE Andresen Rd		Amount of Each Disbursement this Period 129.30 Transaction ID : SB17.5182
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement Sign materials	Category/ Type 004
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA District: 03		

SUBTOTAL of Disbursements This Page (optional).....	1615.19
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 52			
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LatteDa Coffee		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 205 E 39th St		Amount of Each Disbursement this Period 3.24
City Vancouver State WA Zip Code 98663	Purpose of Disbursement Bob In-kind 2nd Qtr - coffee mtg	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6425 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 003		

Full Name (Last, First, Middle Initial) B. MailChimp		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 512 Means St, Ste 404		Amount of Each Disbursement this Period 50.00
City Atlanta State GA Zip Code 30318	Purpose of Disbursement Internet software	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.5167
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 001		

Full Name (Last, First, Middle Initial) c. MailChimp		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2014
Mailing Address 512 Means St, Ste 404		Amount of Each Disbursement this Period 50.00
City Atlanta State GA Zip Code 30318	Purpose of Disbursement Email software	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.5541
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 001		

SUBTOTAL of Disbursements This Page (optional).....	100.00
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 35 OF 52		
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Marsha Manning		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 3801 NE 172nd Ave		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.5012
City Vancouver	State WA	
Zip Code 98682	Purpose of Disbursement In-kind - accounting	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	
State: District:	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Marsha Manning		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 3801 NE 172nd Ave		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.5149
City Vancouver	State WA	
Zip Code 98682	Purpose of Disbursement In-kind - Accounting	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	
State: District:	<input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Marsha Manning		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 3801 NE 172nd Ave		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.5552
City Vancouver	State WA	
Zip Code 98682	Purpose of Disbursement In-kind - Accounting	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	
State: District:	<input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1200.00
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 52			
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Maria's Properties		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014
Mailing Address 10013 Hwy 99		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.5550
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement In-kind - Office Rent	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. Maria's Properties		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 10013 Hwy 99		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.5549
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement In-kind - Office rent	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. Maria's Properties		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 10013 Hwy 99		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.5548
City Vancouver	State WA	
Zip Code 98665	Purpose of Disbursement In-kind - Office rent	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).....	1800.00
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 37 OF 52			
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Markon!		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 12209-A NE Fourth Plain Rd		Amount of Each Disbursement this Period 3059.59 Transaction ID : SB17.5162
City Vancouver State WA Zip Code 98682	Purpose of Disbursement Signs 004 Category/Type	
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA District: 03		

Full Name (Last, First, Middle Initial) B. Markon!		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 12209-A NE Fourth Plain Rd		Amount of Each Disbursement this Period 3059.59 Transaction ID : SB17.5187
City Vancouver State WA Zip Code 98682	Purpose of Disbursement Signs 004 Category/Type	
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA District: 03		

Full Name (Last, First, Middle Initial) c. McDonalds		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 100 Willapa PLace		Amount of Each Disbursement this Period 4.52 Transaction ID : SB17.6419 [MEMO ITEM]
City Raymond State WA Zip Code 98577	Purpose of Disbursement Signs 002 Category/Type Bob In-kind 2nd Qtr - travel food	
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA District: 03		

SUBTOTAL of Disbursements This Page (optional).....	6119.18
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 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. McMenamins East		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 1900 NE 162nd Ave, Ste B107		Amount of Each Disbursement this Period 11.00
City Vancouver State WA Zip Code 98684	Purpose of Disbursement Bob In-kind 2nd Qtr - lunch mtg	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6427 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. MOD Pizza		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 1302 Sixth Ave		Amount of Each Disbursement this Period 23.52
City Seattle State WA Zip Code 98101	Purpose of Disbursement Bob In-kind - 2nd Qtr - food for staff mtg	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6403 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 23.83
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Misc office supplies	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.4986
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	23.83
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 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 15.59
City Vancouver	State WA	
Zip Code 98665		
Purpose of Disbursement Misc office supplies		Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS		
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: WA	District: 03	

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 18.95
City Vancouver	State WA	
Zip Code 98665		
Purpose of Disbursement Misc office supplies		Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS		
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: WA	District: 03	

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 49.00
City Vancouver	State WA	
Zip Code 98665		
Purpose of Disbursement Postage		Category/ Type 003
Candidate Name BOB DINGETHAL FOR CONGRESS		
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: WA	District: 03	

SUBTOTAL of Disbursements This Page (optional).....	83.54
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 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 8812 NE 5th Ave		Amount of Each Disbursement this Period 102.76 Transaction ID : SB17.5527
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Postage and misc 003 Category/Type	
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA District: 03		

Full Name (Last, First, Middle Initial) B. Old Spaghetti Factory		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 0715 SW Bancroft St		Amount of Each Disbursement this Period 22.49 Transaction ID : SB17.6421 [MEMO ITEM]
City Portland State OR Zip Code 97239	Purpose of Disbursement Bob In-kind 2nd Qtr - lunch mtg 003 Category/Type	
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA District: 03		

Full Name (Last, First, Middle Initial) c. Oriental Trading		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 5455 S 90th St		Amount of Each Disbursement this Period 41.50 Transaction ID : SB17.6402 [MEMO ITEM]
City Omaha State NE Zip Code 68127	Purpose of Disbursement Bob In-kind - 2nd Qtr - event materials 007 Category/Type	
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA District: 03		

SUBTOTAL of Disbursements This Page (optional).....	102.76
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 41 OF 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Panda Express		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 500 Triangle Shopping Ctr		Amount of Each Disbursement this Period 15.51
City Longview	State WA	
Zip Code 98632	Purpose of Disbursement Bob In-kind 2nd Qtr - travel food	Transaction ID : SB17.6414
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 002	
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)	[MEMO ITEM]
State: WA District: 03		

Full Name (Last, First, Middle Initial) B. Peking Garden		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 2101 Main St		Amount of Each Disbursement this Period 40.04
City Vancouver	State WA	
Zip Code 98660	Purpose of Disbursement Bob In-kind 2nd Qtr - fundraising mtg	Transaction ID : SB17.6407
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 003	
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)	[MEMO ITEM]
State: WA District: 03		

Full Name (Last, First, Middle Initial) c. Rapid Refill		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 308 E Mill Plain Blvd		Amount of Each Disbursement this Period 117.03
City Vancouver	State WA	
Zip Code 98660	Purpose of Disbursement Ink	Transaction ID : SB17.5183
Candidate Name BOB DINGETHAL FOR CONGRESS	Category/Type 001	
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: WA District: 03		

SUBTOTAL of Disbursements This Page (optional).....	117.03
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 42 OF 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Safeway		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 13023 NE Hwy 99		Amount of Each Disbursement this Period 5.95
City Vancouver State WA Zip Code 98686	Purpose of Disbursement Bob In-kind 2nd Qtr - travel food	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6408 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 002		

Full Name (Last, First, Middle Initial) B. Safeway		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 13023 NE Hwy 99		Amount of Each Disbursement this Period 48.41
City Vancouver State WA Zip Code 98686	Purpose of Disbursement Bob In-kind 2nd Qtr - gas	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6409 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 002		

Full Name (Last, First, Middle Initial) c. Safeway-Longview		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2014
Mailing Address 2930 Ocean Beach Hwy		Amount of Each Disbursement this Period 44.86
City Longview State WA Zip Code 98632	Purpose of Disbursement Bob In-kind 2nd Qtr - gas	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6417 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 002		

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 43 OF 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Safeway-Woodland		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2014
Mailing Address 725 Pacific Ave		Amount of Each Disbursement this Period 51.83
City Woodland State WA Zip Code 98674	Purpose of Disbursement Bob In-kind 2nd Qtr - gas	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6410 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Seasons & Regions		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 6660 SW Capitol Hwy		Amount of Each Disbursement this Period 36.00
City Portland State OR Zip Code 97219	Purpose of Disbursement Bob In-kind 2nd Qtr - fundraising mtg	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6426 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Secretary of State		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 416 Sid Snyder Ave SW		Amount of Each Disbursement this Period 1740.00
City Olympia State WA Zip Code 98504	Purpose of Disbursement Filing Fee	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.5164
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1740.00
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 44 OF 52		
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Shell		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 12604 NW 36th Ave		Amount of Each Disbursement this Period 50.94
City Vancouver State WA Zip Code 98685	Purpose of Disbursement Bob In-kind 2nd Qtr - gas	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6413 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 002		

Full Name (Last, First, Middle Initial) B. Shell		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014
Mailing Address 12604 NW 36th Ave		Amount of Each Disbursement this Period 55.87
City Vancouver State WA Zip Code 98685	Purpose of Disbursement Bob In-kind 2nd Qtr - gas	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6415 [MEMO ITEM]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 002		

Full Name (Last, First, Middle Initial) c. Shur-Way Building Center		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2014
Mailing Address 7124 NE St Johns Rd		Amount of Each Disbursement this Period 54.18
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Wood for signs	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.5525
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Category/Type 001		

SUBTOTAL of Disbursements This Page (optional).....	54.18
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 45 OF 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Shur-Way Building Center		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 7124 NE St Johns Rd		Amount of Each Disbursement this Period 119.00 Transaction ID : SB17.5526
City Vancouver	State WA	
Purpose of Disbursement Wood for signs		Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS		
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: WA District: 03		

Full Name (Last, First, Middle Initial) B. Signs & T-Shirt Printing		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 10501 NE Hwy 99 #49		Amount of Each Disbursement this Period 385.90 Transaction ID : SB17.5174
City Vancouver	State WA	
Purpose of Disbursement T-shirts		Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS		
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: WA District: 03		

Full Name (Last, First, Middle Initial) c. Signs & T-Shirt Printing		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 10501 NE Hwy 99 #49		Amount of Each Disbursement this Period 130.08 Transaction ID : SB17.5516
City Vancouver	State WA	
Purpose of Disbursement T-Shirts		Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS		
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: WA District: 03		

SUBTOTAL of Disbursements This Page (optional).....	634.98
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 46 OF 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Signs & T-Shirt Printing		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 10501 NE Hwy 99 #49		Amount of Each Disbursement this Period 205.96 Transaction ID : SB17.5538
City Vancouver	State WA	
Zip Code 98686	Purpose of Disbursement T-shirts	Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA	District: 03	

Full Name (Last, First, Middle Initial) B. The Couve Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 601 Main St, Ste 209		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.4977
City Vancouver	State WA	
Zip Code 98660	Purpose of Disbursement Staff	Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA	District: 03	

Full Name (Last, First, Middle Initial) c. The Couve Group		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 601 Main St, Ste 209		Amount of Each Disbursement this Period 2650.00 Transaction ID : SB17.4987
City Vancouver	State WA	
Zip Code 98660	Purpose of Disbursement Staff and mileage	Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA	District: 03	

SUBTOTAL of Disbursements This Page (optional).....	5355.96
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 47 OF 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. The Couve Group		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 601 Main St, Ste 209		Amount of Each Disbursement this Period 2524.64 Transaction ID : SB17.5163
City Vancouver	State WA	
Zip Code 98660	Purpose of Disbursement Management fee	Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA District: 03	

Full Name (Last, First, Middle Initial) B. The Couve Group		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 601 Main St, Ste 209		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.5521
City Vancouver	State WA	
Zip Code 98660	Purpose of Disbursement Campaign Manager	Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA District: 03	

Full Name (Last, First, Middle Initial) c. The Couve Group		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 601 Main St, Ste 209		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.5528
City Vancouver	State WA	
Zip Code 98660	Purpose of Disbursement Campaign Manager	Category/ Type 001
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA District: 03	

SUBTOTAL of Disbursements This Page (optional).....	7524.64
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 48 OF 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. The Couve Group		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 601 Main St, Ste 209		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.5533
City Vancouver State WA Zip Code 98660	Purpose of Disbursement Campaign Mgmt 001 Category/Type	
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA District: 03		

Full Name (Last, First, Middle Initial) B. Total Merchant Concepts, Inc		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 12300 NE Fourth Plain Blvd		Amount of Each Disbursement this Period 78.02 Transaction ID : SB17.4968
City Vancouver State WA Zip Code 98682	Purpose of Disbursement CC processing fees 001 Category/Type	
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA District: 03		

Full Name (Last, First, Middle Initial) c. Total Merchant Concepts, Inc		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 12300 NE Fourth Plain Blvd		Amount of Each Disbursement this Period 91.73 Transaction ID : SB17.5158
City Vancouver State WA Zip Code 98682	Purpose of Disbursement CC Fees 003 Category/Type	
Candidate Name BOB DINGETHAL FOR CONGRESS	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: WA District: 03		

SUBTOTAL of Disbursements This Page (optional).....	2669.75
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 49 OF 52	
	<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)
BOB DINGETHAL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Total Merchant Concepts, Inc		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 12300 NE Fourth Plain Blvd		Amount of Each Disbursement this Period 120.67
City Vancouver State WA Zip Code 98682	Purpose of Disbursement CC Processing Fees	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.5518
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: WA District: 03	Category/Type 003	

Full Name (Last, First, Middle Initial) B. Winco		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 9700 NE Hwy 99		Amount of Each Disbursement this Period 92.64
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Dona In-kind vol event - food	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6432
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: WA District: 03	Category/Type 007	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Winco		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 9700 NE Hwy 99		Amount of Each Disbursement this Period 50.34
City Vancouver State WA Zip Code 98665	Purpose of Disbursement Dona In-kind vol event - food	
Candidate Name BOB DINGETHAL FOR CONGRESS		Transaction ID : SB17.6433
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: WA District: 03	Category/Type 007	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	120.67
TOTAL This Period (last page this line number only).....	33787.58

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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4131**
BOB DINGETHAL FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2014
BOB E DINGETHAL Primary
 Mailing Address General
 17811 NW 56TH AVE Other (specify) ▼

City State ZIP Code
 RIDGEFIELD WA 98642

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
175.95	0.00	175.95

TERMS Date Incurred Date Due Interest Rate Secured:
 M 11 / D 14 / Y 2013 M M / D D / Y 11/1/2014 0.00 % (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).....	▶	175.95
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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4130**
BOB DINGETHAL FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) BOB E DINGETHAL	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 17811 NW 56TH AVE		

City	State	ZIP Code
RIDGEFIELD	WA	98642

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000.00	0.00	2000.00

TERMS		Date Incurred	Date Due	Interest Rate	Secured:
M 12	D 02	Y 2013	M M / D D / Y 11/1/2014	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....	▶	2000.00
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

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4150**
BOB DINGETHAL FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2014
BOB E DINGETHAL Primary
Mailing Address General
17811 NW 56TH AVE Other (specify) ▼

City State ZIP Code
RIDGEFIELD WA 98642

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200.00	0.00	200.00

TERMS Date Incurred Date Due Interest Rate Secured:
M 12 / D 20 / Y 2013 M M / D D / Y 11/1/2014 0.00 % (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).....	▶	200.00
TOTALS This Period (last page in this line only).....	▶	2375.95

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