

# 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

Ringo for Congress

ADDRESS (number and street)

PO Box 2008

Check if different than previously reported. (ACC)

Boise

ID

83701

2. FEC IDENTIFICATION NUMBER ▼

C C00550202

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

ID

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on 11 / 04 / 2014 in the State of ID

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

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

Election on / / in the State of

5. Covering Period

10 / 01 / 2014 through 10 / 15 / 2014

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

Type or Print Name of Treasurer Ron Beitelspacher

Signature of Treasurer Ron Beitelspacher

[Electronically Filed]

Date

10 / 22 / 2014

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

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Ringo 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))....	11879.91	186178.50
(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)).....	11879.91	186178.50
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	18403.62	200022.08
(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)).....	18403.62	200022.08
8. Cash on Hand at Close of Reporting Period (from Line 27).....	15470.09	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	29838.67	

**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

**Ringo for Congress**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2655.00	88200.11
(ii) Unitemized.....	3224.91	81053.39
(iii) TOTAL of contributions from individuals ▶	5879.91	169253.50
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	6000.00	16400.00
(d) The Candidate.....	0.00	525.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	11879.91	186178.50
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	29838.67
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	29838.67
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	11879.91	216017.17

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	18403.62	200022.08
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	18403.62	200022.08

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	21993.80
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	11879.91
25. SUBTOTAL (add Line 23 and Line 24).....	33873.71
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	18403.62
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	15470.09

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Ringo for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gilbert Beyer**

Mailing Address 307 Sunnyside Rd

City Sandpoint State ID Zip Code 83864-6472

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

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : VNHXJDC1YY8**

Amount of Each Receipt this Period  
 25.00

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2529.91**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : VNHXJDC1YY8E**

Amount of Each Receipt this Period  
 25.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Thomas Bode**

Mailing Address 2106 Orchard Ave

City Moscow State ID Zip Code 83843-9469

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

Name of Employer Self Occupation Writer

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  
 10 / 01 / 2014

**Transaction ID : VNHXJD91G08**

Amount of Each Receipt this Period  
 100.00

\* Earmarked Contribution: See Below

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

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

125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address **PO Box 441146**

City **West Somerville** State **MA** Zip Code **02144-0031**

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

Name of Employer \_\_\_\_\_ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **2529.91**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 09 / 2014**

**Transaction ID : VNHXJD91G08E**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **100.00**

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Deborah W. Fisher**

Mailing Address **1292 E Brittney Ave**

City **Coeur D Alene** State **ID** Zip Code **83815-7323**

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

Name of Employer \_\_\_\_\_ Occupation **Retired**

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  
**10 / 03 / 2014**

**Transaction ID : VNHXJD91GB5**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **100.00**

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address **PO Box 441146**

City **West Somerville** State **MA** Zip Code **02144-0031**

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

Name of Employer \_\_\_\_\_ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **2529.91**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 09 / 2014**

**Transaction ID : VNHXJD91GB5E**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **100.00**

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

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

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

\_\_\_\_\_ **100.00**

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wayne P Fuller</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014	
Mailing Address PO Box 148		<b>Transaction ID : VNHXJDB3AM3</b>	
City Weiser	State ID	Zip Code 83672-0148	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 900.00		

Full Name (Last, First, Middle Initial) <b>B. Rita D Haggardt</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2014	
Mailing Address 2037 E Lewis St		<b>Transaction ID : VNHXJD9V8N0</b>	
City Pocatello	State ID	Zip Code 83201-3319	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>C. Prudy Prudence Heimsch</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 07 / 2014	
Mailing Address 213 N Howard St		<b>Transaction ID : VNHXJDB3CE9</b>	
City Moscow	State ID	Zip Code 83843-2706	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 675.00		

\* Earmarked Contribution: See Below

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> 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 8 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address **PO Box 441146**

City **West Somerville** State **MA** Zip Code **02144-0031**

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

Name of Employer \_\_\_\_\_ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **2529.91**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 14 / 2014**

**Transaction ID : VNHXJDB3CE9E**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50.00**

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Prudy Prudence Heimsch**

Mailing Address **213 N Howard St**

City **Moscow** State **ID** Zip Code **83843-2706**

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 **725.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 14 / 2014**

**Transaction ID : VNHXJDC28G0**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50.00**

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address **PO Box 441146**

City **West Somerville** State **MA** Zip Code **02144-0031**

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

Name of Employer \_\_\_\_\_ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **2529.91**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 15 / 2014**

**Transaction ID : VNHXJDC28G0E**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50.00**

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

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

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

\_\_\_\_\_ **50.00**

\_\_\_\_\_



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 33
	<input 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)  
**Ringo for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sue Young Hovey**

Mailing Address 830 N Cleveland St

City Moscow State ID Zip Code 83843-9405

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  
1575.00

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

**Transaction ID : VNHXJDB3F80**

Amount of Each Receipt this Period  
50.00

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2529.91

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : VNHXJDB3F80E**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Dianne Hunt**

Mailing Address 3212 N Winsome Rd

City Boise State ID Zip Code 83702-0952

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  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : VNHXJDB3AP9**

Amount of Each Receipt this Period  
200.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 33
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**David B Hussey**

Mailing Address 75 Crooked Ear Ct

City Sandpoint State ID Zip Code 83864-6588

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  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : VNHXJD9V8J7**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Connie Hutchison**

Mailing Address 5608 Chestnut Ln

City Mc Farland State WI Zip Code 53558-8802

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

Name of Employer Not Employed Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : VNHXJDC28K3**

Amount of Each Receipt this Period  
50.00

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2529.91

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : VNHXJDC28K3E**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

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

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

150.00

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

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Karen Lynn Lewis**

Mailing Address 5338 Lenville Rd

City Moscow State ID Zip Code 83843-7468

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

Name of Employer Moscow Realty Occupation Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
210.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 01 / 2014

**Transaction ID : VNHXJD91FK6**

Amount of Each Receipt this Period  
10.00

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2529.91

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 09 / 2014

**Transaction ID : VNHXJD91FK6E**

Amount of Each Receipt this Period  
10.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Lois R Morgan**

Mailing Address 219 N Straughan Ave

City Boise State ID Zip Code 83712-6404

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

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 07 / 2014

**Transaction ID : VNHXJDB3BY5**

Amount of Each Receipt this Period  
15.00

\* Earmarked Contribution: See Below

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

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

25.00

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

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

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2529.91**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : VNHXJDB3BY5E**

Amount of Each Receipt this Period  
**15.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Lois R Morgan**

Mailing Address 219 N Straughan Ave

City Boise State ID Zip Code 83712-6404

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

Name of Employer Occupation  
Not Employed Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**290.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : VNHXJDC1Z20**

Amount of Each Receipt this Period  
**15.00**

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

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

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2529.91**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : VNHXJDC1Z20E**

Amount of Each Receipt this Period  
**15.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

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

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

**15.00**

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

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

Full Name (Last, First, Middle Initial) <b>A. John S Pool</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 09 / 2014	
Mailing Address 522 N Garfield St		<b>Transaction ID : VNHXJDB3DS9</b>	
City Moscow	State ID	Zip Code 83843-3670	Amount of Each Receipt this Period _____ 15.00
FEC ID number of contributing federal political committee. <b>C</b>		* Earmarked Contribution: See Below	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 750.00		

Full Name (Last, First, Middle Initial) <b>B. Actblue</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 14 / 2014	
Mailing Address PO Box 441146		<b>Transaction ID : VNHXJDB3DS9E</b>	
City West Somerville	State MA	Zip Code 02144-0031	Amount of Each Receipt this Period _____ 15.00
FEC ID number of contributing federal political committee. <b>C</b>		[MEMO ITEM] Note: Above Contribution earmarked through this organization.	
Name of Employer	Occupation Conduit total listed in Agg. field		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2529.91		

Full Name (Last, First, Middle Initial) <b>C. John S Pool</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014	
Mailing Address 522 N Garfield St		<b>Transaction ID : VNHXJDC28V6</b>	
City Moscow	State ID	Zip Code 83843-3670	Amount of Each Receipt this Period _____ 25.00
FEC ID number of contributing federal political committee. <b>C</b>		* Earmarked Contribution: See Below	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 775.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 40.00
<b>TOTAL</b> 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: PAGE 14 OF 33  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address **PO Box 441146**

City **West Somerville** State **MA** Zip Code **02144-0031**

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

Name of Employer Occupation  
**Conduit total listed in Agg. field**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2529.91**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**10 / 15 / 2014**

**Transaction ID : VNHXJDC28V6E**

Amount of Each Receipt this Period  
**25.00**

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Louise Regelin**

Mailing Address **PO Box 9212**

City **Moscow** State **ID** Zip Code **83843-1712**

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

Name of Employer Occupation  
**Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2300.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**10 / 09 / 2014**

**Transaction ID : VNHXJD91EX2**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Frank Rodriguez**

Mailing Address **211 N Polk St**

City **Moscow** State **ID** Zip Code **83843-2744**

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

Name of Employer Occupation  
**Not Employed**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**650.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**10 / 15 / 2014**

**Transaction ID : VNHXJDCEBD7**

Amount of Each Receipt this Period  
**50.00**

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

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

**150.00**

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

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Sam M Scripter**

Mailing Address 805 Indian Hills Dr

City Moscow State ID Zip Code 83843-9309

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

Name of Employer Not Employed Occupation Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

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

**Transaction ID : VNHXJDB3F23**

Amount of Each Receipt this Period  
100.00

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2529.91

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : VNHXJDB3F23E**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Richard Lee Shackelford**

Mailing Address 2147 W South Fork Dr

City Eagle State ID Zip Code 83616-7216

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

Name of Employer Treasure Valley Veterinary Hospital Occupation Veterinarian

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : VNHXJDB3E54**

Amount of Each Receipt this Period  
100.00

\* Earmarked Contribution: See Below

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

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

200.00

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

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address PO Box 441146

City: West Somerville State: MA Zip Code: 02144-0031

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

Name of Employer: Occupation: Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2529.91

Date of Receipt: 10 / 14 / 2014

**Transaction ID : VNHXJDB3E54E**

Amount of Each Receipt this Period: 100.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Phyllis Solomon**

Mailing Address 2606 SE Baypoint Dr Unit 24

City: Vancouver State: WA Zip Code: 98683-3108

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

Name of Employer: Occupation: Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2100.00

Date of Receipt: 10 / 15 / 2014

**Transaction ID : VNHXJDCECT3**

Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Keith Stutler**

Mailing Address 13654 SE 1st St

City: Bellevue State: WA Zip Code: 98005-3702

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

Name of Employer: Occupation: DS-IQ, Inc. Software Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 400.00

Date of Receipt: 10 / 15 / 2014

**Transaction ID : VNHXJDC2997**

Amount of Each Receipt this Period: 75.00

\* Earmarked Contribution: See Below

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

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

1075.00



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

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

**A. Actblue**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Conduit total listed in Agg. field  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2529.91

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : VNHXJDC2997E**  
 Amount of Each Receipt this Period  
 75.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**B. Kathleen J Warren**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3270 W Twin Rd  
 City Moscow State ID Zip Code 83843-8130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Not Employed  
 Not Employed  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 325.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 14 / 2014  
**Transaction ID : VNHXJDC28M1**  
 Amount of Each Receipt this Period  
 100.00  
 \* Earmarked Contribution: See Below

**C. Actblue**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 441146  
 City West Somerville State MA Zip Code 02144-0031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation Conduit total listed in Agg. field  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2529.91

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014  
**Transaction ID : VNHXJDC28M1E**  
 Amount of Each Receipt this Period  
 100.00  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

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

100.00

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

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Rich John Wekerle**

Mailing Address 1699 Appaloosa Rd

City Moscow State ID Zip Code 83843-2452

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 **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : VNHXJDC1YW2**

Amount of Each Receipt this Period  
 50.00

\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
**Actblue**

Mailing Address PO Box 441146

City West Somerville State MA Zip Code 02144-0031

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2529.91**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : VNHXJDC1YW2E**

Amount of Each Receipt this Period  
 50.00

**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
**Jacqueline Wright**

Mailing Address 404 N Hayes St

City Moscow State ID Zip Code 83843-3235

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 **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : VNHXJDCEC08**

Amount of Each Receipt this Period  
 25.00

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

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

75.00

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

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Susan M Zenier**

Mailing Address 237 Circle Dr

City Moscow State ID Zip Code 83843-2136

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  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : VNHXJDCECQ9**

Amount of Each Receipt this Period  
50.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

50.00

2655.00

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

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL FEDERATION OF DEMOCRATIC WOMEN PAC**

Mailing Address 532 Polk St

City Riverside State NJ Zip Code 08075-3018

FEC ID number of contributing federal political committee. **C** C00353037

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 Y Y  
 10 / 15 / 2014

**Transaction ID : VNHXJDCED68**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 3 Park Pl

City Annapolis State MD Zip Code 21401-3687

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : VNHXJDCEDE1**

Amount of Each Receipt this Period  
 5000.00

**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).....

6000.00

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 33		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>A. Actblue</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>09</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		09		2014
M M	/	D D	/	Y Y Y Y								
10		09		2014								
Mailing Address PO Box 441146		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>West Somerville</td> <td>MA</td> <td>02144-0031</td> </tr> </table>		City	State	Zip Code	West Somerville	MA	02144-0031	<table border="1"> <tr> <td>22.09</td> </tr> </table>	22.09			
City	State	Zip Code										
West Somerville	MA	02144-0031										
22.09												
Purpose of Disbursement Service fees		<table border="1"> <tr> <td>001</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	001	Category/ Type								
001												
Category/ Type												
Candidate Name												
Office Sought:	Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>B. Actblue</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>15</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		15		2014
M M	/	D D	/	Y Y Y Y								
10		15		2014								
Mailing Address PO Box 441146		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>West Somerville</td> <td>MA</td> <td>02144-0031</td> </tr> </table>		City	State	Zip Code	West Somerville	MA	02144-0031	<table border="1"> <tr> <td>43.97</td> </tr> </table>	43.97			
City	State	Zip Code										
West Somerville	MA	02144-0031										
43.97												
Purpose of Disbursement Service fees		<table border="1"> <tr> <td>001</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	001	Category/ Type								
001												
Category/ Type												
Candidate Name												
Office Sought:	Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>C. Actblue</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>15</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		15		2014
M M	/	D D	/	Y Y Y Y								
10		15		2014								
Mailing Address PO Box 441146		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>West Somerville</td> <td>MA</td> <td>02144-0031</td> </tr> </table>		City	State	Zip Code	West Somerville	MA	02144-0031	<table border="1"> <tr> <td>34.21</td> </tr> </table>	34.21			
City	State	Zip Code										
West Somerville	MA	02144-0031										
34.21												
Purpose of Disbursement Service fees		<table border="1"> <tr> <td>001</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	001	Category/ Type								
001												
Category/ Type												
Candidate Name												
Office Sought:	Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"> <tr> <td>100.27</td> </tr> </table>	100.27
100.27		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bulldog Finance</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 02 / 2014</b>
Mailing Address 1250 Connecticut Ave NW Ste 200		Amount of Each Disbursement this Period <b>390.63</b>
City Washington State DC Zip Code 20036-2643	Purpose of Disbursement Fundraising-consultant Candidate Name Category/Type <b>003</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : VNGYA9X4PK4</b>

Full Name (Last, First, Middle Initial) <b>B. Bulldog Finance</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 10 / 2014</b>
Mailing Address 1250 Connecticut Ave NW Ste 200		Amount of Each Disbursement this Period <b>602.59</b>
City Washington State DC Zip Code 20036-2643	Purpose of Disbursement Fundraising-consultant Candidate Name Category/Type <b>003</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : VNGYA9X4R99</b>

Full Name (Last, First, Middle Initial) <b>c. Corey Crowley-Hall</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 10 / 2014</b>
Mailing Address 1088 Carterwood Dr		Amount of Each Disbursement this Period <b>1200.00</b>
City Moscow State ID Zip Code 83843	Purpose of Disbursement Salary Candidate Name Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : VNGYA9X4SK1</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2193.22</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 33			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jill Ellsworth</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2014
Mailing Address 4800 W Willow Ln		Amount of Each Disbursement this Period 1810.00 <b>Transaction ID : VNGYA9X4PH9</b>
City Boise	State ID	
Zip Code 83703-4352	Purpose of Disbursement Consultant-Compliance	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Mandate Media</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 1801 NE Multnomah St		Amount of Each Disbursement this Period 950.00 <b>Transaction ID : VNGYA9X4PJ7</b>
City Portland	State OR	
Zip Code 97232-2113	Purpose of Disbursement Web site-email communications	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Estefania Mondragon</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2014
Mailing Address 821 W Florida Ave		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : VNGYA9X4PY1</b>
City Nampa	State ID	
Zip Code 83686-2881	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3760.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

Full Name (Last, First, Middle Initial) <b>A. NGP Van, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 02 / 2014</b>
Mailing Address 1011 15th St NW, Ste 500		Amount of Each Disbursement this Period <b>550.00</b> <b>Transaction ID : VNGYA9X4PM2</b>
City Washington State DC Zip Code 20005-2617	Purpose of Disbursement Software lease Candidate Name Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. NGP Van, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 02 / 2014</b>
Mailing Address 1011 15th St NW, Ste 500		Amount of Each Disbursement this Period <b>150.00</b> <b>Transaction ID : VNGYA9X4PN0</b>
City Washington State DC Zip Code 20005-2617	Purpose of Disbursement Fundraising-consultant Candidate Name Category/Type <b>003</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Printcraft Printing, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 01 / 2014</b>
Mailing Address 1628 Main St		Amount of Each Disbursement this Period <b>7038.67</b> <b>Transaction ID : VNGYA9X62Q9</b>
City Lewiston State ID Zip Code 83501-2025	Purpose of Disbursement Printing-signs Candidate Name Category/Type <b>006</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>7738.67</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 33	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

Full Name (Last, First, Middle Initial) <b>A. R Design</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 03 / 2014</b>
Mailing Address <b>112 W 4th St</b>		Amount of Each Disbursement this Period <b>140.00</b> <b>Transaction ID : VNGYA9X4PS2</b>
City <b>Moscow</b> State <b>ID</b> Zip Code <b>83843-4311</b>	Purpose of Disbursement <b>Design-print materials</b> Category/Type <b>007</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Saga Leadership</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 10 / 2014</b>
Mailing Address <b>2519 W Idaho St</b>		Amount of Each Disbursement this Period <b>1500.00</b> <b>Transaction ID : VNGYA9X4RV1</b>
City <b>Boise</b> State <b>ID</b> Zip Code <b>83702-4841</b>	Purpose of Disbursement <b>Consultant-Communications</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Steeley Print</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 02 / 2014</b>
Mailing Address <b>201 Capital St</b>		Amount of Each Disbursement this Period <b>440.75</b> <b>Transaction ID : VNGYA9X4PP8</b>
City <b>Lewiston</b> State <b>ID</b> Zip Code <b>83501-1804</b>	Purpose of Disbursement <b>Printing-signs</b> Category/Type <b>006</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2080.75</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 33			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

Full Name (Last, First, Middle Initial) <b>A. Steeley Print</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address 201 Capital St		Amount of Each Disbursement this Period 883.71 <b>Transaction ID : VNGYA9X4PQ6</b>
City Lewiston State ID Zip Code 83501-1804	Purpose of Disbursement Printing-signs Candidate Name Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Michael Strickland</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 5210 Cleveland Blvd Ste 140		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : VNGYA9X5R22</b>
City Caldwell State ID Zip Code 83607-1798	Purpose of Disbursement Consultant-Communications Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Michael Strickland</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 5210 Cleveland Blvd Ste 140		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : VNGYA9X5RH1</b>
City Caldwell State ID Zip Code 83607-1798	Purpose of Disbursement Consultant-Communications Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	883.71
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 33		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Ringo for Congress**

Full Name (Last, First, Middle Initial) <b>A. Team Idaho</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2014
Mailing Address 204 S Main St		Amount of Each Disbursement this Period 1500.00
City Moscow	State ID	
Zip Code 83843-2808	Purpose of Disbursement Office rent	<b>Transaction ID : VNGYA9X4QK5</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. U S Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2014
Mailing Address 700 E Bannock St		Amount of Each Disbursement this Period 147.00
City Boise	State ID	
Zip Code 83712-6409	Purpose of Disbursement Postage	<b>Transaction ID : VNGYA9X4T29</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1647.00
<b>TOTAL</b> This Period (last page this line number only).....	18403.62

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Ringo for Congress

Transaction ID : VNHXJBXHH8L

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

Shirley Gene Ringo

[PERSONAL FUNDS]

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1021 Herington Rd

City State ZIP Code  
Moscow ID 83843-8119

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
16000.00 0.00 16000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 12 / D 30 / Y 2013 M M / D D / Y none % (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)..... ▶ 16000.00

**TOTALS** This Period (last page in this line only)..... ▶

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
Ringo for Congress

Transaction ID : VNHXJC80CT7L

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Shirley Gene Ringo

Election: 2014

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1021 Herington Rd

City State ZIP Code  
Moscow ID 83843-8119

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
500.00 0.00 500.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 02 / D 12 / Y 2014 M M / D D / Y none % (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)..... ▶ 500.00

**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) **Ringo for Congress** Transaction ID : **VNHXJCAN198L**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **Shirley Gene Ringo** *[PERSONAL FUNDS]* Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1021 Herington Rd

City State ZIP Code  
Moscow ID 83843-8119

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

**TERMS**

Date Incurred M 02 / D 28 / Y 2014	Date Due M / D / Y none	Interest Rate none % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	[ ] 2000.00
<b>TOTALS</b> 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) **Ringo for Congress** Transaction ID : **VNHXJCPVD38L**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **Shirley Gene Ringo** *[PERSONAL FUNDS]* Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1021 Herington Rd

City State ZIP Code  
Moscow ID 83843-8119

Original Amount of Loan 1000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1000.00
------------------------------------	------------------------------------	--

**TERMS**

Date Incurred M 04 / D 08 / Y 2014	Date Due M / D / Y none	Interest Rate none % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	[ ] 1000.00
<b>TOTALS</b> 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) **Ringo for Congress** Transaction ID : **VNHXJD6XSB7L**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **Shirley Gene Ringo** *[PERSONAL FUNDS]* Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1021 Herington Rd

City State ZIP Code  
Moscow ID 83843-8119

Original Amount of Loan 3300.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 3300.00
------------------------------------	------------------------------------	--

**TERMS**

Date Incurred: M 09 / D 04 / Y 2014  
Date Due: M / D / Y none  
Interest Rate: none % (apr)  
Secured:  Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... ▶ 3300.00

**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) **Ringo for Congress** Transaction ID : **VNHXJD9JEV0L**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **Shirley Gene Ringo** *[PERSONAL FUNDS]* Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1021 Herington Rd

City State ZIP Code  
Moscow ID 83843-8119

Original Amount of Loan 7038.67	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 7038.67
------------------------------------	------------------------------------	--

**TERMS**

Date Incurred M 09 / D 30 / Y 2014	Date Due M / D / Y none	Interest Rate none % (apr)	Secured: <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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	7038.67
<b>TOTALS</b> This Period (last page in this line only).....	▶	29838.67

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