

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 Thompson for Congress

ADDRESS (number and street) 30151 Tomas Rancho Sta Margarita CA 92688 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00514695 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT OR 05

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER) (b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 10 / 18 / 2012 through M M / D D / Y Y Y Y 11 / 26 / 2012

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 Betty Presley

Signature of Treasurer Betty Presley [Electronically Filed] Date M M / D D / Y Y Y Y 11 / 30 / 2012

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Thompson 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))....	10986.62	33102.98
(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)).....	10986.62	33102.98
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	15393.92	29421.64
(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)).....	15393.92	29421.64
8. Cash on Hand at Close of Reporting Period (from Line 27).....	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Thompson for Congress

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

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/> (date after general election) through <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="6336.50"/>	<input type="text" value="30092.98"/>	<input type="text" value="100.00"/>
(ii) Unitemized		
<input type="text" value="1750.12"/>	<input type="text" value="6956.48"/>	<input type="text" value="0.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="8086.62"/>	<input type="text" value="30092.98"/>	<input type="text" value="100.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="2900.00"/>	<input type="text" value="2900.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 27

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	110.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
10986.62	33102.98	100.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00		
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	4.24	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
10986.62	33107.22	100.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 27

Write or Type Committee Name

Thompson for Congress

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

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
15393.92	29421.64	3785.58
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	0.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 27

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(c) Other Political Committees (such as PACs)		
0.00	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))		
0.00	0.00	0.00
21. OTHER DISBURSEMENTS		
0.00	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)		
15393.92	29421.64	3785.58

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

10986.62	33102.98	100.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

15393.92	29421.64	3785.58
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4407.30
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	10986.62
25. SUBTOTAL (add Line 23 and Line 24).....	15393.92
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	15393.92
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	0.00

**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 27
	<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)
Thompson for Congress

A. Full Name (Last, First, Middle Initial)
Robert Mosqueda, Jr

Mailing Address **PO Box 12928**

City **Salem** State **OR** Zip Code **97309**

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

Name of Employer **Business Computer Consulting** Occupation **Consulting**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 22 / 2012

Transaction ID : INCA401

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Valda Newton

Mailing Address **4766 Andrews Rd**

City **Medford** State **OR** Zip Code **97501**

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

Name of Employer **AIRA** Occupation **Executive Assistant**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 22 / 2012

Transaction ID : INCA396

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
GRIP Productions NW

Mailing Address **1740 Shaff Road, #226**

City **Stayton** State **OR** Zip Code **97383**

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

Name of Employer **Sole Proprietorship** Occupation **Mark Anderson/Owner**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
386.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 25 / 2012

Transaction ID : NONA407

Amount of Each Receipt this Period
386.50

Ad Placement Services

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

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

2911.50

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

Form/Schedule: SA11AI

Transaction ID : NONA407

INKIND: Ad Placement Services

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 27
	<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)
Thompson for Congress

A. Full Name (Last, First, Middle Initial)
Mark Anderson

Mailing Address 1740 Shaff Road

City Stayton State OR Zip Code 97385

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

Name of Employer GRIP Productions NW Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 386.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2012

Transaction ID : NDTA1

Amount of Each Receipt this Period
 _____ 386.50

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
James Huffman

Mailing Address 5340 SW Hewett Blvd

City Portland State OR Zip Code 97221

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2012

Transaction ID : INCA409

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
Paul Newton

Mailing Address 4400 Northwest Walnut, #72

City Corvallis State OR Zip Code 97330

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

Name of Employer Enterprise Occupation Manager Training

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2012

Transaction ID : INCA418

Amount of Each Receipt this Period
 _____ 2000.00

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

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

_____ 2250.00

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

Form/Schedule: SA11AI

Transaction ID : NDTA1

Inkind: Ad Placement Services

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 27
	<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)
Thompson for Congress

A. Full Name (Last, First, Middle Initial)
William Curtright

Mailing Address PO Box 1350

City Jefferson State OR Zip Code 97352

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

Name of Employer Ames Research Laboratories Occupation CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2012

Transaction ID : INCA420

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Scott Stice

Mailing Address 1309 Liberty St

City Salem State OR Zip Code 97302

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

Name of Employer Eye Care Physicians Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2012

Transaction ID : INCA428

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
William Rose

Mailing Address 584 Dune Oaks

City Georgetown State SC Zip Code 29440

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2012

Transaction ID : INCA430

Amount of Each Receipt this Period
100.00

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

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

850.00

**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 27
	<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)
Thompson for Congress

A. Full Name (Last, First, Middle Initial)
Diane E. Fritz

Mailing Address 10115 Parrish Gap Rd

City State Zip Code
Turner OR 97392

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

Name of Employer Occupation
Diane E. Fritz, CPA CPA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
625.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 30 / 2012

Transaction ID : INCA431

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Diane E. Fritz

Mailing Address 10115 Parrish Gap Rd

City State Zip Code
Turner OR 97392

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

Name of Employer Occupation
Diane E. Fritz, CPA CPA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
625.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 02 / 2012

Transaction ID : INCA437

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Alan Miller

Mailing Address 1212 N Water

City State Zip Code
Silverton OR 97381

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

Name of Employer Occupation
None Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 02 / 2012

Transaction ID : INCA438

Amount of Each Receipt this Period
200.00

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

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

275.00

**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 27
	<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)
Thompson for Congress

A. Full Name (Last, First, Middle Initial)
Diana Powers Evans

Mailing Address 1910 Madrona Ave S

City Salem State OR Zip Code 97302

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2012

Transaction ID : INCA440

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

50.00

6336.50

**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 27
	<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)
Thompson for Congress

A. Full Name (Last, First, Middle Initial)
Oregon Contractors Assn PAC

Mailing Address PO Box 9105

City Salem State OR Zip Code 97305

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2012

Transaction ID : INCA432

Amount of Each Receipt this Period
 400.00

B. Full Name (Last, First, Middle Initial)
Oregon Republican Party Victory

Mailing Address PO Box 1586

City Lake Oswego State OR Zip Code 97035

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2012

Transaction ID : INCA435

Amount of Each Receipt this Period
 2500.00

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).....

2900.00

2900.00

**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 15 OF 27			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
Thompson for Congress

Full Name (Last, First, Middle Initial) A. GRIP Productions NW			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 1740 Shaff Road, #226			Amount of Each Disbursement this Period 2850.00
City Stayton	State OR	Zip Code 97383	Transaction ID : EXPB402
Purpose of Disbursement Media Buy		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Voter Connections			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 2131 Capitol Ave, #306			Amount of Each Disbursement this Period 5.75
City Sacramento	State CA	Zip Code 95816	Transaction ID : EXPB397
Purpose of Disbursement Credit Card Processing Fees		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. GRIP Productions NW			Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address 1740 Shaff Road, #226			Amount of Each Disbursement this Period 386.50
City Stayton	State OR	Zip Code 97383	Transaction ID : NONB407
Purpose of Disbursement Ad Placement Services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	3242.25
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : NONB407

INKIND: Ad Placement Services

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 27			
	<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)
Thompson for Congress

Full Name (Last, First, Middle Initial) A. Voter Connections		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address 2131 Capitol Ave, #306		Amount of Each Disbursement this Period 364.95
City Sacramento State CA Zip Code 95816	Purpose of Disbursement Credit Card Processing Fees	Transaction ID : EXPB429
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. GRIP Productions NW		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address 1740 Shaff Road, #226		Amount of Each Disbursement this Period 2850.00
City Stayton State OR Zip Code 97383	Purpose of Disbursement Media Buy	Transaction ID : EXPB419
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Betty Presley & Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 31051 Tomas		Amount of Each Disbursement this Period 1400.00
City RachStaMargarita State CA Zip Code 92688	Purpose of Disbursement Financial Analyst	Transaction ID : EXPB444
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4614.95
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 27			
	<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)
Thompson for Congress

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 31531 Santa Margarita Pkwy		Amount of Each Disbursement this Period 16.00 Transaction ID : EXPB446
City RnchoStaMargarita	State CA Zip Code 92688	
Purpose of Disbursement Bank Fee	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. GRIP Productions NW		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 1740 Shaff Road, #226		Amount of Each Disbursement this Period 1830.00 Transaction ID : EXPB434
City Stayton	State OR Zip Code 97383	
Purpose of Disbursement Media Buy	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Federal Express		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address Payment Center		Amount of Each Disbursement this Period 33.33 Transaction ID : EXPB436
City Memphis	State TN Zip Code 38101	
Purpose of Disbursement Shipping Costs	001 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1879.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 27			
	<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)
Thompson for Congress

A. Voter Connections

Full Name (Last, First, Middle Initial)
Mailing Address 2131 Capitol Ave, #306

City Sacramento State CA Zip Code 95816

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012
 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 01 / 2012

Amount of Each Disbursement this Period: 121.81

Transaction ID : EXPB439

Category/Type: 001

B. Betty Presley & Associates, Inc.

Full Name (Last, First, Middle Initial)
Mailing Address 31051 Tomas

City RachStaMargarita State CA Zip Code 92688

Purpose of Disbursement
Financial Analyst

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012
 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 06 / 2012

Amount of Each Disbursement this Period: 1400.00

Transaction ID : EXPB452

Category/Type: 001

c. Lynn Howlett Photography

Full Name (Last, First, Middle Initial)
Mailing Address 2033 25th Street SE

City Salem State OR Zip Code 97302

Purpose of Disbursement
Photography Services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012
 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 06 / 2012

Amount of Each Disbursement this Period: 350.00

Transaction ID : EXPB442

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 1871.81

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 27	
	<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)
Thompson for Congress

Full Name (Last, First, Middle Initial)
A. Federal Express

Mailing Address Payment Center

City Memphis State TN Zip Code 38101

Purpose of Disbursement Shipping Costs

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 16 / 2012

Amount of Each Disbursement this Period: 68.56

Transaction ID : EXPB450

Category/Type: 001

Full Name (Last, First, Middle Initial)
B. Betty Presley & Associates, Inc.

Mailing Address 31051 Tomas

City RachStaMargarita State CA Zip Code 92688

Purpose of Disbursement Financial Analyst

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 26 / 2012

Amount of Each Disbursement this Period: 298.55

Transaction ID : EXPB468

Category/Type: 001

Full Name (Last, First, Middle Initial)
c. Fred Thompson

Mailing Address 4554 12th Avenue South

City Salem State OR Zip Code 97302

Purpose of Disbursement Printing Costs

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 26 / 2012

Amount of Each Disbursement this Period: 8.30

Transaction ID : EXPB458

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 375.41

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 27	
	<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)
Thompson for Congress

Full Name (Last, First, Middle Initial) A. Fred Thompson		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 4554 12th Avenue South		Amount of Each Disbursement this Period 632.16 Transaction ID : EXPB464
City Salem	State OR	
Zip Code 97302	Purpose of Disbursement Travel Costs	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Frontier Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 7001 Tower Road		Amount of Each Disbursement this Period 632.16 Transaction ID : PDTB8EXPB464 [MEMO ITEM]
City Denver	State CO	
Zip Code 80249	Purpose of Disbursement Travel Costs	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Fred Thompson		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 4554 12th Avenue South		Amount of Each Disbursement this Period 1847.06 Transaction ID : EXPB456
City Salem	State OR	
Zip Code 97302	Purpose of Disbursement Yard Signs	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2479.22
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 27	
	<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)
Thompson for Congress

A. Political Yard Signs

Full Name (Last, First, Middle Initial)
Mailing Address 916 Byrd Avenue

City Neenah State WI Zip Code 54956

Purpose of Disbursement Yard Signs Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement 11 / 26 / 2012

Amount of Each Disbursement this Period 1847.06

Transaction ID : PDTB6EXPB456

[MEMO ITEM]

B. Fred Thompson

Full Name (Last, First, Middle Initial)
Mailing Address 4554 12th Avenue South

City Salem State OR Zip Code 97302

Purpose of Disbursement Travel & Print Ad Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement 11 / 26 / 2012

Amount of Each Disbursement this Period 395.95

Transaction ID : EXPB454

c. GameDay Media

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2269

City Lake Oswego State OR Zip Code 97035

Purpose of Disbursement Print Ad Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement 11 / 26 / 2012

Amount of Each Disbursement this Period 325.00

Transaction ID : PDTB5EXPB454

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) 395.95

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 27			
	<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)
Thompson for Congress

Full Name (Last, First, Middle Initial) A. Fred Thompson			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012	
Mailing Address 4554 12th Avenue South			Amount of Each Disbursement this Period 250.00	
City Salem	State OR	Zip Code 97302	Transaction ID : EXPB466	
Purpose of Disbursement Delegation Fees		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Oregon Republican Party			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012	
Mailing Address PO Box 1586			Amount of Each Disbursement this Period 250.00	
City Lake Oswego	State OR	Zip Code 97035	Transaction ID : PDTB9EXPB466	
Purpose of Disbursement Delegation Fees		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Fred Thompson			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012	
Mailing Address 4554 12th Avenue South			Amount of Each Disbursement this Period 185.00	
City Salem	State OR	Zip Code 97302	Transaction ID : EXPB462	
Purpose of Disbursement Print Ad		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	435.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 27			
	<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)
Thompson for Congress

Full Name (Last, First, Middle Initial) A. Northwest Senior News		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 4159 Cherry Ave NE		Amount of Each Disbursement this Period 185.00
City Keizer	State OR	
Zip Code 97303	Purpose of Disbursement Print Ad	Transaction ID : PDTB7EXPB462
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Fred Thompson		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 4554 12th Avenue South		Amount of Each Disbursement this Period 100.00
City Salem	State OR	
Zip Code 97302	Purpose of Disbursement Buttons	Transaction ID : EXPB460
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

SUBTOTAL of Disbursements This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	15393.92

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Thompson for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Betty Presley & Associates, Inc.	Nature of Debt (Purpose): Financial Analyst
Mailing Address 31051 Tomas	
City State Zip Code RachStaMargarita CA 92688	

Outstanding Balance Beginning This Period 1400.00	Transaction ID : PAYD366	
Amount Incurred This Period 0.00	Payment This Period 1400.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fred Thompson	Nature of Debt (Purpose): Travel & Print Ad
Mailing Address 4554 12th Avenue South	
City State Zip Code Salem OR 97302	

Outstanding Balance Beginning This Period 395.95	Transaction ID : PAYD262	
Amount Incurred This Period 0.00	Payment This Period 395.95	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fred Thompson	Nature of Debt (Purpose): Yard Signs
Mailing Address 4554 12th Avenue South	
City State Zip Code Salem OR 97302	

Outstanding Balance Beginning This Period 1847.06	Transaction ID : PAYD288	
Amount Incurred This Period 0.00	Payment This Period 1847.06	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Thompson for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Fred Thompson

Mailing Address 4554 12th Avenue South

City State Zip Code
Salem OR 97302

Nature of Debt (Purpose):
Printing Costs

Outstanding Balance Beginning This Period **8.30** Transaction ID : **PAYD299**

Amount Incurred This Period **0.00** Payment This Period **8.30** Outstanding Balance at Close of This Period **0.00**

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Fred Thompson

Mailing Address 4554 12th Avenue South

City State Zip Code
Salem OR 97302

Nature of Debt (Purpose):
Buttons

Outstanding Balance Beginning This Period **100.00** Transaction ID : **PAYD338**

Amount Incurred This Period **0.00** Payment This Period **100.00** Outstanding Balance at Close of This Period **0.00**

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Fred Thompson

Mailing Address 4554 12th Avenue South

City State Zip Code
Salem OR 97302

Nature of Debt (Purpose):
Print Ad

Outstanding Balance Beginning This Period **185.00** Transaction ID : **PAYD342**

Amount Incurred This Period **0.00** Payment This Period **185.00** Outstanding Balance at Close of This Period **0.00**

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

Thompson for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Fred Thompson

Mailing Address 4554 12th Avenue South

City State Zip Code
 Salem OR 97302

Nature of Debt (Purpose):
 Travel Costs

Outstanding Balance Beginning This Period **Transaction ID : PAYD394**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Fred Thompson

Mailing Address 4554 12th Avenue South

City State Zip Code
 Salem OR 97302

Nature of Debt (Purpose):
 Delegation Fees

Outstanding Balance Beginning This Period **Transaction ID : PAYD395**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="0.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>