

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼

Example: If typing, type over the lines.

12FE4M5

BOB DINGETHAL FOR CONGRESS

ADDRESS (number and street)

PO Box 668

Check if different than previously reported. (ACC)

Vancouver

WA

98666

2. **FEC IDENTIFICATION NUMBER** ▼

C C00553818

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

WA

03

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on MM / DD / YYYY

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY
01 / 01 / 2014

through

MM / DD / YYYY
03 / 31 / 2014

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

Type or Print Name of Treasurer Marsha Manning

Signature of Treasurer Marsha Manning

[Electronically Filed]

Date

MM / DD / YYYY
10 / 09 / 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 | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

BOB DINGETHAL FOR CONGRESS

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

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 40333.46 | 47717.80 |
| (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))..... | 40333.46 | 47717.80 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 31090.56 | 38023.29 |
| (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))..... | 31090.56 | 38023.29 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 12070.46 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 2375.95 | |

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

BOB DINGETHAL FOR CONGRESS

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

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------------|------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 29484.85 | 36244.19 |
| (ii) Unitemized..... | 10798.61 | 11423.61 |
| (iii) TOTAL of contributions from individuals ▶ | 40283.46 | 47667.80 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 50.00 | 50.00 |
| (d) The Candidate..... | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 40333.46 | 47717.80 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | |
| | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 2375.95 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 2375.95 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | | |
| | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)..... | | |
| | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 40333.46 | 50093.75 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 31090.56 | 38023.29 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 0.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 31090.56 | 38023.29 |

III. CASH SUMMARY

| | |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 2827.56 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 40333.46 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 43161.02 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 31090.56 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 12070.46 |

**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 47 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Peter D Aller

Mailing Address 3801 NE 172nd Ave

City Vancouver State WA Zip Code 98682

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
205.91

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 30 / 2014

Transaction ID : SA11AI.4490

Amount of Each Receipt this Period
162.30

In-kind - Food for hospitality suite

B. Full Name (Last, First, Middle Initial)
Baird for Congress

Mailing Address PO Box 5016

City Vancouver State WA Zip Code 98668

FEC ID number of contributing federal political committee. **C** C00310904

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

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

Transaction ID : SA11AI.4797

Amount of Each Receipt this Period
2000.00

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

Mailing Address 75 El Camino Real

City White Salmon State WA Zip Code 98672

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

Name of Employer none Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 07 / 2014

Transaction ID : SA11AI.4195

Amount of Each Receipt this Period
1000.00

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

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

3162.30

**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 47 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Candy Bonneville Jr.

Mailing Address 308 NW 25th PI

City State Zip Code
Battle Ground WA 98604

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

Name of Employer Occupation
None Unemployed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
464.45

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 31 / 2014

Transaction ID : SA11AI.4505

Amount of Each Receipt this Period
464.45
 In-kind - Food for hospitality suite @state meeting

B. Full Name (Last, First, Middle Initial)
Candy Bonneville Jr.

Mailing Address 308 NW 25th PI

City State Zip Code
Battle Ground WA 98604

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

Name of Employer Occupation
None Unemployed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
514.45

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 05 / 2014

Transaction ID : SA11AI.4518

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Candy Bonneville Jr.

Mailing Address 308 NW 25th PI

City State Zip Code
Battle Ground WA 98604

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

Name of Employer Occupation
None Unemployed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
539.45

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

Transaction ID : SA11AI.4773

Amount of Each Receipt this Period
25.00

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

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

539.45

**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 47 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

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

Mailing Address 893 Middle Fork Rd

City Onolaska State WA Zip Code 98570

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 26 / 2014

Transaction ID : SA11AI.4237

Amount of Each Receipt this Period
250.00

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

Mailing Address 893 Middle Fork Rd

City Onolaska State WA Zip Code 98570

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

Name of Employer Boeing Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 26 / 2014

Transaction ID : SA11AI.4235

Amount of Each Receipt this Period
250.00

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

Mailing Address 8918 NE 40th Pl

City Vancouver State WA Zip Code 98665

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

Name of Employer None Occupation Unemployed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

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

Transaction ID : SA11AI.4500

Amount of Each Receipt this Period
700.00
In-kind - 2 used computers

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

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

1200.00

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 47 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

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

Mailing Address 3800 NE 160th Ave

City Vancouver State WA Zip Code 98682

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

Name of Employer SEIU Occupation Homecare Giver

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 03 / 2014

Transaction ID : SA11AI.4510

Amount of Each Receipt this Period
 500.00

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

Mailing Address 3800 NE 160th Ave

City Vancouver State WA Zip Code 98682

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

Name of Employer SEIU Occupation Homecare Giver

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11AI.4703

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Robert L Cohen

Mailing Address 13320 NE 42nd Ave

City Vancouver State WA Zip Code 98686

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 02 / 2014

Transaction ID : SA11AI.4669

Amount of Each Receipt this Period
 250.00

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

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

1250.00

**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 47 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

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

Mailing Address 17811 NW 56TH AVE

City: RIDGEFIELD State: WA Zip Code: 98642

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

Name of Employer: Gifford Pinchot Task Force Occupation: Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 5073.39

Date of Receipt: 03 / 30 / 2014

Transaction ID : SA11AI.5714

Amount of Each Receipt this Period: 988.10

In-kind - Bob - Early support travel, mtgs, setup

B. Full Name (Last, First, Middle Initial)
Greg Flakus

Mailing Address 13111 NE 5th Ave

City: Vancouver State: WA Zip Code: 98685

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

Name of Employer: GF Strategies Occupation: President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 15 / 2014

Transaction ID : SA11AI.4731

Amount of Each Receipt this Period: 250.00

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

Mailing Address 1708 NW Gregory Dr

City: Vancouver State: WA Zip Code: 98665

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

Name of Employer: Omega Industries Occupation: Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1100.00

Date of Receipt: 03 / 31 / 2014

Transaction ID : SA11AI.4484

Amount of Each Receipt this Period: 450.00

In-kind - Office Rent

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

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

1688.10

**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 47 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

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

Mailing Address 1708 NW Gregory Dr

City Vancouver State WA Zip Code 98665-6004

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

Name of Employer Maria's Properties Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

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

Transaction ID : SA11AI.4487

Amount of Each Receipt this Period
450.00

In-kind - Office rent

B. Full Name (Last, First, Middle Initial)
Rifat K Haffar

Mailing Address Kinderspitalgasse 1/10

City Vienna State ZZ Zip Code 01001

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 14 / 2014

Transaction ID : SA11AI.4422

Amount of Each Receipt this Period
500.00

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

Mailing Address 10006 NE 36th Ct

City Vancouver State WA Zip Code 98686

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

Name of Employer Self Occupation Writer-Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1045.00

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

Transaction ID : SA11AI.4875

Amount of Each Receipt this Period
1045.00

In-kind - Research & writing

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

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

1995.00

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

Form/Schedule: SA11AI

Transaction ID : SA11AI.4422

Rifat Haffar is currently living out of the country, but is a citizen of the United States. He has provided a copy of his US passport as proof of US citizenship.

Form/Schedule:

Transaction ID:

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 47 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. Paul L Henderson | | Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2014 | |
| Mailing Address 900 Washington St, Ste 1020 | | Transaction ID : SA11AI.4759 | |
| City Vancouver | State WA | Zip Code 98660 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 | |
| Name of Employer Henderson Law Firm PLLC | Occupation Attorney | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 250.00 | | |

| | | | |
|---|-----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. Paul Holmes | | Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2014 | |
| Mailing Address 11300 NW 34th Ave | | Transaction ID : SA11AI.4712 | |
| City Vancouver | State WA | Zip Code 98685 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2400.00 | |
| Name of Employer None | Occupation Retired | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 2400.00 | | |

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. Martha Howe | | Date of Receipt M M / D D / Y Y Y Y 01 / 26 / 2014 | |
| Mailing Address 514 E 28th St | | Transaction ID : SA11AI.4311 | |
| City Vancouver | State WA | Zip Code 98663-3021 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 | |
| Name of Employer Technoloft, Inc | Occupation CEO | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 500.00 | | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 3150.00 |
| TOTAL This Period (last page this line number only)..... | 3150.00 |

**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 47 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Karen Hunt

Mailing Address 8002 NE 71st Loop

City Vancouver State WA Zip Code 98662

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 25 / 2014

Transaction ID : SA11AI.4594

Amount of Each Receipt this Period
 _____ 500.00

B. Full Name (Last, First, Middle Initial)
Thomas Hunt

Mailing Address 8002 NE 71st Loop

City Vancouver State WA Zip Code 98662

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

Name of Employer Hunt Communications Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 25 / 2014

Transaction ID : SA11AI.4592

Amount of Each Receipt this Period
 _____ 500.00

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

Mailing Address 4000 NE 128th St

City Vancouver State WA Zip Code 98686

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

Name of Employer Klineco Enterprises Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 26 / 2014

Transaction ID : SA11AI.4258

Amount of Each Receipt this Period
 _____ 250.00

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

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

_____ 1250.00

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

| | | |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 OF 47 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Veronica Kline

Mailing Address 4000 NE 128th St

City Vancouver State WA Zip Code 98686

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 26 / 2014

Transaction ID : SA11AI.4256

Amount of Each Receipt this Period
250.00

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

Mailing Address 11611 NW 43rd Ct

City Vancouver State WA Zip Code 98685

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 05 / 2014

Transaction ID : SA11AI.4516

Amount of Each Receipt this Period
500.00

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

Mailing Address 18103 SE 16th St

City Vancouver State WA Zip Code 98683

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : SA11AI.4871

Amount of Each Receipt this Period
2500.00
In-kind - Research 50 hrs @\$100/hr

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

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

3250.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 OF 47 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Gimi Larsen

Mailing Address 18103 SE 16th St

City Vancouver State WA Zip Code 98683

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2014

Transaction ID : SA11AI.5414

Amount of Each Receipt this Period
2500.00

In-kind - Research

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

Mailing Address 14516 NW 20th Ave

City Vancouver State WA Zip Code 98685

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

Name of Employer Automated Data Processing Occupation Systems Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 03 / 2014

Transaction ID : SA11AI.4537

Amount of Each Receipt this Period
250.00

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

Mailing Address 3801 NE 172nd Ave

City Vancouver State WA Zip Code 98682

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

Name of Employer Self Occupation Accounting & Consulting

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

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

Transaction ID : SA11AI.4869

Amount of Each Receipt this Period
900.00

In-kind - Treasurer work

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

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

3650.00

**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 47 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Linda McLain

Mailing Address 7410 NW 16th Ave

City Vancouver State WA Zip Code 98665

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

Name of Employer Currie & McLain P.S. Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11AI.4757

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
William Nelson

Mailing Address 310 W 34th St

City Vancouver State WA Zip Code 98660

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

Name of Employer Baumgartner Nelson & Wagner Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 01 / 2014

Transaction ID : SA11AI.4512

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Donald J Orange

Mailing Address 4418 NE 179th St

City Vancouver State WA Zip Code 98686

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

Name of Employer Hoesly Eco Auto Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 06 / 2014

Transaction ID : SA11AI.4193

Amount of Each Receipt this Period
500.00

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

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

1000.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 OF 47 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mary A Orange

Mailing Address 4418 NE 179th St

City Vancouver State WA Zip Code 98686

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

Name of Employer Mary's Bookkeeping Service Occupation Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 06 / 2014

Transaction ID : SA11AI.4191

Amount of Each Receipt this Period
500.00

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

Mailing Address 17111 NW 69th Ave

City Ridgefield State WA Zip Code 98642

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

Name of Employer Bubba Blue BBQ Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 20 / 2014

Transaction ID : SA11AI.4579

Amount of Each Receipt this Period
500.00

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

Mailing Address 17111 NW 69th Ave

City Ridgefield State WA Zip Code 98642

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

Name of Employer Bubba Blue BBQ Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 20 / 2014

Transaction ID : SA11AI.4581

Amount of Each Receipt this Period
500.00

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

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

1500.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 18 OF 47

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

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

Mailing Address 6405 NW 170th Cir

City State Zip Code
 Ridgefield WA 98642

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

Name of Employer Occupation
 Compas Oncology Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

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

Transaction ID : SA11AI.4785

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Julie E Smith

Mailing Address 6405 NW 170th Cir

City State Zip Code
 Ridgefield WA 98642

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

Name of Employer Occupation
 None Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

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

Transaction ID : SA11AI.4787

Amount of Each Receipt this Period
 500.00

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

Mailing Address PO Box 131

City State Zip Code
 Long Beach WA 98631

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

Name of Employer Occupation
 Anna Lena's Inc Designer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2014

Transaction ID : SA11AI.4671

Amount of Each Receipt this Period
 500.00

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

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

1500.00

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 OF 47 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ty Stober

Mailing Address 514 W 23rd St

City Vancouver State WA Zip Code 98660

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

Name of Employer NEEA Occupation Initiative Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4514

Amount of Each Receipt this Period
 250.00

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

Mailing Address 3860 Cameron Dr NE

City Lacey State WA Zip Code 98516

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4812

Amount of Each Receipt this Period
 250.00

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

Mailing Address 18809 SE 17th St

City Vancouver State WA Zip Code 98683

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

Name of Employer Daimler Trucks North America Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 26 / 2014

Transaction ID : SA11AI.4250

Amount of Each Receipt this Period
 250.00

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

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

750.00

**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 47 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15 | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

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

Mailing Address 18809 SE 17th St

City Vancouver State WA Zip Code 98683

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

Name of Employer None Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 26 / 2014

Transaction ID : SA11AI.4252

Amount of Each Receipt this Period
 250.00

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

Mailing Address 110 Krestview Lane

City Woodland State WA Zip Code 98674

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

Name of Employer WTB, Inc Occupation Construction

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4843

Amount of Each Receipt this Period
 500.00

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

Mailing Address 5280 NE 28th Ave

City Ft Lauderdale State FL Zip Code 33308

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

Name of Employer Kayne Anderson Capital Advisor Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4761

Amount of Each Receipt this Period
 2600.00

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

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

3350.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 21 OF 47

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

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

Mailing Address 17717 NW 56th Ave

City State Zip Code
 Ridgefield WA 98642

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

Name of Employer Occupation
 Hoffman Construction Estimator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11Al.4735

Amount of Each Receipt this Period
 250.00

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).....

250.00

29484.85

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

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 22 OF 47 |
| | <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)
BOB DINGETHAL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Clark County Democratic Womens Club

Mailing Address 5320 NE 81st Ave
#484

City Vancouver State WA Zip Code 98662

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2014

Transaction ID : SA11C.4325

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

50.00

**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 23 OF 47 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Peter D Aller | | Date of Disbursement MM / DD / YYYY 01 / 30 / 2014 |
| Mailing Address 3801 NE 172nd Ave | | Amount of Each Disbursement this Period 626.75 Transaction ID : SB17.4493 |
| City Vancouver | State WA | |
| Purpose of Disbursement In-kind - Food for hospitality suite | | Category/ Type 007 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA | District: 03 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Blind Onion | | Date of Disbursement MM / DD / YYYY 01 / 23 / 2014 |
| Mailing Address 9230 NE Hwy 99 | | Amount of Each Disbursement this Period 18.58 Transaction ID : SB17.6372 |
| City Vancouver | State WA | |
| Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup | | Category/ Type 003 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA | District: 03 | |

[MEMO ITEM]

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. Candy Bonneville Jr. | | Date of Disbursement MM / DD / YYYY 01 / 31 / 2014 |
| Mailing Address 308 NW 25th Pl | | Amount of Each Disbursement this Period 464.45 Transaction ID : SB17.4508 |
| City Battle Ground | State WA | |
| Purpose of Disbursement In-kind - Food for hospitality suite @state meeting | | Category/ Type 007 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA | District: 03 | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 626.75 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 24 OF 47 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Bubba Blue BBQ | | Date of Disbursement MM / DD / YYYY 02 / 20 / 2014 |
| Mailing Address 17111 NW 69th Ave | | Amount of Each Disbursement this Period 1110.60 Transaction ID : SB17.4618 |
| City Ridgefield | State WA | |
| Zip Code 98642 | Purpose of Disbursement Food for campaign kickoff | Category/ Type 007 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA | District: 03 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Jill Campbell | | Date of Disbursement MM / DD / YYYY 03 / 03 / 2014 |
| Mailing Address 8918 NE 40th Pl | | Amount of Each Disbursement this Period 700.00 Transaction ID : SB17.4502 |
| City Vancouver | State WA | |
| Zip Code 98665 | Purpose of Disbursement In-kind - 2 used computers | Category/ Type 001 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA | District: 03 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) c. Capitol Campus Parking | | Date of Disbursement MM / DD / YYYY 01 / 24 / 2014 |
| Mailing Address 103 Sid Snyder Ave SW | | Amount of Each Disbursement this Period 6.00 Transaction ID : SB17.6393 [MEMO ITEM] |
| City Olympia | State WA | |
| Zip Code 98501 | Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup | Category/ Type 002 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA | District: 03 | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1810.60 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 25 OF 47 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Columbia Litho, Inc | | Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014 |
| Mailing Address 302 NE Sxth Ave | | Amount of Each Disbursement this Period 1055.81 Transaction ID : SB17.4631 |
| City Camas State WA Zip Code 98607 | Purpose of Disbursement Printing - remits & envelopes 001 Category/Type | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Costco | | Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014 |
| Mailing Address 19610 SE 1St | | Amount of Each Disbursement this Period 162.30 Transaction ID : SB17.6394 [MEMO ITEM] |
| City Camas State WA Zip Code 98607 | Purpose of Disbursement Aller reimburse for event food 007 Category/Type | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) c. Costco-Padden | | Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014 |
| Mailing Address 6720 NE 84th St | | Amount of Each Disbursement this Period 464.45 Transaction ID : SB17.6396 [MEMO ITEM] |
| City Vancouver State WA Zip Code 98665 | Purpose of Disbursement Bonnevillle reimburse for event food 007 Category/Type | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1055.81 |
| 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 26 OF 47 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. BOB E DINGETHAL | | Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2014 |
| Mailing Address 17811 NW 56TH AVE | | Amount of Each Disbursement this Period 988.10 |
| City RIDGEFIELD | State WA | |
| Zip Code 98642 | Purpose of Disbursement In-kind - Bob - Early support travel, mtgs, setup | Transaction ID : SB17.5721 |
| Candidate Name | Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA | District: 03 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Federal Election Commission | | Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014 |
| Mailing Address 999 E Street NW | | Amount of Each Disbursement this Period 105.00 |
| City Washington | State DC | |
| Zip Code 20463 | Purpose of Disbursement FEC Training (2) | Transaction ID : SB17.4658 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Category/Type 001 | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: WA | District: 03 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. FedEx Office | | Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014 |
| Mailing Address 1605 NE 7th Ave | | Amount of Each Disbursement this Period 20.30 |
| City Portland | State OR | |
| Zip Code 97232 | Purpose of Disbursement Printing services | Transaction ID : SB17.4407 |
| Candidate Name | Category/Type 006 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: | District: | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 988.10 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 27 OF 47 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Isodoras Garifalakis | | Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014 |
| Mailing Address 1708 NW Gregory Dr | | Amount of Each Disbursement this Period 450.00 Transaction ID : SB17.4486 |
| City Vancouver | State WA | |
| Purpose of Disbursement In-kind - Office Rent | | Category/ Type |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA | District: 03 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Maria Garifalakis | | Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014 |
| Mailing Address 1708 NW Gregory Dr | | Amount of Each Disbursement this Period 450.00 Transaction ID : SB17.4489 |
| City Vancouver | State WA | |
| Purpose of Disbursement In-kind - Office rent | | Category/ Type 001 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA | District: 03 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Peter Harrison | | Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2014 |
| Mailing Address 10006 NE 36th Ct | | Amount of Each Disbursement this Period 1045.00 Transaction ID : SB17.4877 |
| City Vancouver | State WA | |
| Purpose of Disbursement In-kind - Research & writing | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: | District: | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1945.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 28 OF 47 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Hennis Kitchen | | Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014 |
| Mailing Address 120 E Jewett St | | Amount of Each Disbursement this Period 29.00 |
| City State Zip Code White Salmon WA 98672 | Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | Transaction ID : SB17.6366 [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03 | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Hilton Hotel | | Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014 |
| Mailing Address 301 W 6th St | | Amount of Each Disbursement this Period 116.82 |
| City State Zip Code Vancouver WA 98660 | Purpose of Disbursement Hospitality suite | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | Transaction ID : SB17.4661 [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03 | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Gimi Larsen | | Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014 |
| Mailing Address 18103 SE 16th St | | Amount of Each Disbursement this Period 2500.00 |
| City State Zip Code Vancouver WA 98683 | Purpose of Disbursement In-kind - Research 50 hrs @\$100/hr | |
| Candidate Name | | Transaction ID : SB17.4873 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 2500.00 |
| 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 29 OF 47 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Gimi Larsen | | Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014 |
| Mailing Address 18103 SE 16th St | | Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.5415 |
| City Vancouver | State WA | |
| Zip Code 98683 | Purpose of Disbursement In-kind - Research | Category/ Type |
| 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. Marsha Manning | | Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014 |
| Mailing Address 3801 NE 172nd Ave | | Amount of Each Disbursement this Period 349.30 Transaction ID : SB17.4656 |
| City Vancouver | State WA | |
| Zip Code 98682 | Purpose of Disbursement Reimburse misc expense | Category/ Type 001 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | |
| State: WA District: 03 | Other (specify) | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) c. Marsha Manning | | Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014 |
| Mailing Address 3801 NE 172nd Ave | | Amount of Each Disbursement this Period 900.00 Transaction ID : SB17.4870 |
| City Vancouver | State WA | |
| Zip Code 98682 | Purpose of Disbursement In-kind - Treasurer work | Category/ Type |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | |
| State: District: | Other (specify) | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 3749.30 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 30 OF 47 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Name Badges | | Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014 |
| Mailing Address 12260 SW 53rd St, Ste 601 | | Amount of Each Disbursement this Period 33.65 |
| City Cooper City | State FL | Zip Code 33330 |
| Purpose of Disbursement Aller reimburse for name badges | Category/ Type 001 | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: WA District: 03 | |

Transaction ID : SB17.6398
[MEMO ITEM]

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Nick Ande | | Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014 |
| Mailing Address 3614 V St | | Amount of Each Disbursement this Period 241.36 |
| City Vancouver | State WA | Zip Code 98663 |
| Purpose of Disbursement mileage to county meetings | Category/ Type 002 | |
| Candidate Name | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | |

Transaction ID : SB17.4400
[MEMO ITEM]

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Nick Ande | | Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014 |
| Mailing Address 3614 V St | | Amount of Each Disbursement this Period 50.00 |
| City Vancouver | State WA | Zip Code 98663 |
| Purpose of Disbursement campaign phone | Category/ Type 001 | |
| Candidate Name | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | |

Transaction ID : SB17.4402
[MEMO ITEM]

| | |
|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 31 OF 47 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Office Depot | | Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014 |
| Mailing Address 8812 NE 5th Ave | | Amount of Each Disbursement this Period 000,000.00 105.38 |
| City Vancouver State WA Zip Code 98665 | Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | Transaction ID : SB17.6381 [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | Category/Type 001 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Office Max | | Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014 |
| Mailing Address 7601 NE Vancouver Plaza | | Amount of Each Disbursement this Period 000,000.00 127.48 |
| City Vancouver State WA Zip Code 98662 | Purpose of Disbursement Misc office supplies | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | Transaction ID : SB17.4663 [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | Category/Type 001 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Pacific Rental | | Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014 |
| Mailing Address 12814 NE Hwy 99 | | Amount of Each Disbursement this Period 000,000.00 71.54 |
| City Vancouver State WA Zip Code 98686 | Purpose of Disbursement sound system rental | |
| Candidate Name | | Transaction ID : SB17.4403 [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/Type 007 | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 32 OF 47 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Rapid Refill | | Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014 |
| Mailing Address 308 E Mill Plain Blvd | | Amount of Each Disbursement this Period 14.08 |
| City Vancouver | State WA | |
| Zip Code 98660 | Purpose of Disbursement Printer ink | Transaction ID : SB17.4405 |
| Candidate Name | 001 Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Staples | | Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014 |
| Mailing Address 1760 N Jantzen Bech Ctr Dr | | Amount of Each Disbursement this Period 14.99 |
| City Portland | State OR | |
| Zip Code 97217 | Purpose of Disbursement Office supplies | Transaction ID : SB17.4409 |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. The Couve Group | | Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014 |
| Mailing Address 601 Main St, Ste 209 | | Amount of Each Disbursement this Period 2500.00 |
| City Vancouver | State WA | |
| Zip Code 98660 | Purpose of Disbursement Campaign Mgr payroll | Transaction ID : SB17.4388 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | 001 Category/ Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 2500.00 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 33 OF 47 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. The Couve Group | | Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014 |
| Mailing Address 601 Main St, Ste 209 | | Amount of Each Disbursement this Period 412.27 Transaction ID : SB17.4399 |
| City Vancouver State WA Zip Code 98660 | Purpose of Disbursement Reimbursement - see memos 001 Category/Type | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. The Couve Group | | Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014 |
| Mailing Address 601 Main St, Ste 209 | | Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.4411 |
| City Vancouver State WA Zip Code 98660 | Purpose of Disbursement Campaign mgr payroll 001 Category/Type | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) c. The Couve Group | | Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2014 |
| Mailing Address 601 Main St, Ste 209 | | Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.4614 |
| City Vancouver State WA Zip Code 98660 | Purpose of Disbursement Campaign mgr salary 001 Category/Type | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | | |

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| SUBTOTAL of Disbursements This Page (optional) | 5412.27 |
| TOTAL This Period (last page this line number only) | |

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

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 34 OF 47 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. The Couve Group | | Date of Disbursement MM / DD / YYYY 02 / 25 / 2014 |
| Mailing Address 601 Main St, Ste 209 | | Amount of Each Disbursement this Period 2550.00 Transaction ID : SB17.4626 |
| City Vancouver | State WA | |
| Zip Code 98660 | Purpose of Disbursement Mgr salary & phone | Category/ Type 001 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: WA District: 03 | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. The Couve Group | | Date of Disbursement MM / DD / YYYY 03 / 12 / 2014 |
| Mailing Address 601 Main St, Ste 209 | | Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17.4644 |
| City Vancouver | State WA | |
| Zip Code 98660 | Purpose of Disbursement Campaign Mgr payroll | Category/ Type 001 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) c. The Couve Group | | Date of Disbursement MM / DD / YYYY 03 / 28 / 2014 |
| Mailing Address 601 Main St, Ste 209 | | Amount of Each Disbursement this Period 2607.52 Transaction ID : SB17.4654 |
| City Vancouver | State WA | |
| Zip Code 98660 | Purpose of Disbursement Payroll & mileage | Category/ Type 001 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) | 7657.52 |
| TOTAL This Period (last page this line number only) | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 35 OF 47 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. The Couve Group | | Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014 |
| Mailing Address 601 Main St, Ste 209 | | Amount of Each Disbursement this Period 107.52 |
| City Vancouver | State WA | |
| Zip Code 98660 | Purpose of Disbursement Mileage | Transaction ID : SB17.4655 |
| Candidate Name | 002 Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Total Merchant Concepts, Inc | | Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014 |
| Mailing Address 12300 NE Fourth Plain Blvd | | Amount of Each Disbursement this Period 191.71 |
| City Vancouver | State WA | |
| Zip Code 98682 | Purpose of Disbursement PayTrace setup & card reader | Transaction ID : SB17.4394 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | 003 Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | | |

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|--|--|---|
| Full Name (Last, First, Middle Initial) c. Total Merchant Concepts, Inc | | Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014 |
| Mailing Address 12300 NE Fourth Plain Blvd | | Amount of Each Disbursement this Period 61.12 |
| City Vancouver | State WA | |
| Zip Code 98682 | Purpose of Disbursement Credit Card processing | Transaction ID : SB17.4606 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | 003 Category/Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 252.83 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 36 OF 47 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Total Merchant Concepts, Inc | | Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2014 |
| Mailing Address 12300 NE Fourth Plain Blvd | | Amount of Each Disbursement this Period 445.76 Transaction ID : SB17.4635 |
| City Vancouver State WA Zip Code 98682 | Purpose of Disbursement CC Transaction fees 001 Category/Type | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | | |

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|---|---|--|
| Full Name (Last, First, Middle Initial) B. USPS | | Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014 |
| Mailing Address 1211 Daniels St | | Amount of Each Disbursement this Period 105.05 Transaction ID : SB17.4640 |
| City Vancouver State WA Zip Code 98666 | Purpose of Disbursement Postage 003 Category/Type | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | | |

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|---|---|--|
| Full Name (Last, First, Middle Initial) C. USPS | | Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014 |
| Mailing Address 1211 Daniels St | | Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.4650 |
| City Vancouver State WA Zip Code 98666 | Purpose of Disbursement Postage 003 Category/Type | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 445.76 |
| TOTAL This Period (last page this line number only)..... | |

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

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|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 37 OF 47 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. USPS | | Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014 |
| Mailing Address 1211 Daniels St | | Amount of Each Disbursement this Period 242.02 |
| City Vancouver State WA Zip Code 98666 | Purpose of Disbursement Postage 003 Category/Type | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | Transaction ID : SB17.4653 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03 | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

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

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

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| SUBTOTAL of Disbursements This Page (optional)..... | 242.02 |
| TOTAL This Period (last page this line number only)..... | 29185.96 |

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

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|---|------------------------------------|------------------------------------|-------------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 38 OF 47 | |
| | <input type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input checked="" type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Arcadia Court Hotel | | Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2014 |
| Mailing Address 405 Ocean Beach Blvd | | Amount of Each Disbursement this Period 60.94 |
| City Long Beach State WA Zip Code 98631 | Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup | Transaction ID : SB21.6386 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Category/Type 002 | [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03 | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Best Buy | | Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2014 |
| Mailing Address 8700 NE Vancouver Mall Dr #147 | | Amount of Each Disbursement this Period 43.35 |
| City Vancouver State WA Zip Code 98662 | Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup - phone | Transaction ID : SB21.6388 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Category/Type 001 | [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03 | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Boppin Bo's | | Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2014 |
| Mailing Address 7809 NE Vancouver Plaza Dr #110 | | Amount of Each Disbursement this Period 10.26 |
| City Vancouver State WA Zip Code 98662 | Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup | Transaction ID : SB21.6384 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Category/Type 003 | [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03 | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 39 OF 47 | | | |
| | <input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. City of Portland | | Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014 |
| Mailing Address 1120 SW Fifth Ave, Ste 800 | | Amount of Each Disbursement this Period 2.40 |
| City Portland | State OR | |
| Zip Code 97204 | Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup | Transaction ID : SB21.6391 [MEMO ITEM] |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Category/Type 002 | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Hazel Dell/Salmon Creek Business Association | | Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014 |
| Mailing Address 8800 NE Hazel Dell Ave | | Amount of Each Disbursement this Period 10.00 |
| City Vancouver | State WA | |
| Zip Code 98665 | Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup | Transaction ID : SB21.6383 [MEMO ITEM] |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Category/Type 003 | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Hazel Dell Car Wash | | Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014 |
| Mailing Address 6200 NE Hwy 99 | | Amount of Each Disbursement this Period 46.10 |
| City Vancouver | State WA | |
| Zip Code 98685 | Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup | Transaction ID : SB21.6375 [MEMO ITEM] |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Category/Type 002 | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 40 OF 47 | | | |
| | <input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Hilton Hotel | | Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2014 |
| Mailing Address 301 W 6th St | | Amount of Each Disbursement this Period 29.00 |
| City Vancouver | State WA | |
| Zip Code 98660 | Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup | Transaction ID : SB21.6377 [MEMO ITEM] |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Category/Type 003 | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Home Depot | | Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014 |
| Mailing Address 8601 NE Andresen Rd | | Amount of Each Disbursement this Period 102.67 |
| City Vancouver | State WA | |
| Zip Code 98665 | Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup | Transaction ID : SB21.6380 [MEMO ITEM] |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Category/Type 001 | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Peachtree | | Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014 |
| Mailing Address 6600 NW Hwy 99 | | Amount of Each Disbursement this Period 49.00 |
| City Vancouver | State WA | |
| Zip Code 98665 | Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup | Transaction ID : SB21.6369 [MEMO ITEM] |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Category/Type 003 | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | |
|---|--------------------------------------|------------------------------------|-------------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 41 OF 47 | |
| | <input type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input checked="" type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Peachtree | | Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014 |
| Mailing Address 6600 NW Hwy 99 | | Amount of Each Disbursement this Period 12.00 |
| City Vancouver State WA Zip Code 98665 | Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | Transaction ID : SB21.6376 [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | Category/Type 003 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Peachtree | | Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014 |
| Mailing Address 6600 NW Hwy 99 | | Amount of Each Disbursement this Period 13.00 |
| City Vancouver State WA Zip Code 98665 | Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | Transaction ID : SB21.6378 [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | Category/Type 003 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Peets Coffee | | Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014 |
| Mailing Address 13307 NE Hwy 99 Ste 115 | | Amount of Each Disbursement this Period 7.21 |
| City Vancouver State WA Zip Code 98686 | Purpose of Disbursement Bob In-kind - early support mtgs, travel, setup | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | Transaction ID : SB21.6368 [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | Category/Type 003 | |

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|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 42 OF 47 |
| | <input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21 | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Planet Thai | | Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014 |
| Mailing Address 910 NE Tenney Rd | | Amount of Each Disbursement this Period 33.00 |
| City Vancouver State WA Zip Code 98685 | Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | Transaction ID : SB21.6370 [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | Category/Type 003 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Provecho Mexican Grill | | Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014 |
| Mailing Address 1801 Main St | | Amount of Each Disbursement this Period 30.00 |
| City Vancouver State WA Zip Code 98660 | Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | Transaction ID : SB21.6390 [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | Category/Type 003 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Safeway | | Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2014 |
| Mailing Address 13023 NE Hwy 99 | | Amount of Each Disbursement this Period 39.12 |
| City Vancouver State WA Zip Code 98686 | Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | Transaction ID : SB21.6367 [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: WA District: 03 | Category/Type 002 | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | |
|---|--------------------------------------|------------------------------------|-------------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 43 OF 47 | |
| | <input type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input checked="" type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Safeway | | Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014 |
| Mailing Address 13023 NE Hwy 99 | | Amount of Each Disbursement this Period 46.77 |
| City Vancouver State WA Zip Code 98686 | Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | Transaction ID : SB21.6387 [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03 | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Safeway-Woodland | | Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014 |
| Mailing Address 725 Pacific Ave | | Amount of Each Disbursement this Period 44.98 |
| City Woodland State WA Zip Code 98674 | Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | Transaction ID : SB21.6373 [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03 | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Seaview Shell | | Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2014 |
| Mailing Address 39th & Pacific Hwy | | Amount of Each Disbursement this Period 3.12 |
| City Seaview State WA Zip Code 98644 | Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup | |
| Candidate Name BOB DINGETHAL FOR CONGRESS | | Transaction ID : SB21.6385 [MEMO ITEM] |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03 | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |

| | |
|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 44 OF 47 | | | |
| | <input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21 | | | | |

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NAME OF COMMITTEE (In Full)
BOB DINGETHAL FOR CONGRESS

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. USPS | | Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014 |
| Mailing Address 1211 Daniels St | | Amount of Each Disbursement this Period 17.96 |
| City Vancouver | State WA | |
| Zip Code 98666 | Purpose of Disbursement Bob In-kind - early support, travel, mtgs, setup | Transaction ID : SB21.6389 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Category/Type 001 | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: WA | District: 03 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Walmart | | Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2014 |
| Mailing Address 9000 NE Hwy 99 | | Amount of Each Disbursement this Period 99.26 |
| City Vancouver | State WA | |
| Zip Code 98665 | Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup | Transaction ID : SB21.6379 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Category/Type 001 | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: WA | District: 03 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) c. Willems on Main | | Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2014 |
| Mailing Address 907 Main St | | Amount of Each Disbursement this Period 129.00 |
| City Vancouver | State WA | |
| Zip Code 98660 | Purpose of Disbursement Bob In-kind - early support travel, mtgs, setup | Transaction ID : SB21.6382 |
| Candidate Name BOB DINGETHAL FOR CONGRESS | Category/Type 003 | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | [MEMO ITEM] |
| State: WA | District: 03 | |

| | |
|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | 0.00 |

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4131

BOB DINGETHAL FOR CONGRESS

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

[PERSONAL FUNDS]

Election: 2014

BOB E DINGETHAL

Primary
 General
 Other (specify) ▼

Mailing Address
17811 NW 56TH AVE

City State ZIP Code
RIDGEFIELD WA 98642

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

TERMS

Date Incurred Date Due Interest Rate Secured:
M 11 / D 14 / Y 2013 M M / D D / Y 11/1/2014 0.00 % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 175.95
TOTALS This Period (last page in this line only)..... ▶

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

SCHEDULE C (FEC Form 3)
LOANS

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)

Transaction ID : SC/10.4130

BOB DINGETHAL FOR CONGRESS

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

[PERSONAL FUNDS]

Election: 2014

BOB E DINGETHAL

Primary

General

Other (specify) ▼

Mailing Address

17811 NW 56TH AVE

City

State

ZIP Code

RIDGEFIELD

WA

98642

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 12 / D 02 / Y 2013

Date Due

M / D / Y 11/1/2014

Interest Rate

0.00 % (apr)

Secured:

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

2000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

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

| | | |
|------------|-------|----------|
| City | State | ZIP Code |
| RIDGEFIELD | WA | 98642 |

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

TERMS

| | | | |
|----------------------|-------------------------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| M 12 / D 20 / Y 2013 | M M / D D / Y 11/1/2014 | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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

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

| | |
|--|---------|
| SUBTOTALS This Period This Page (optional)..... | 200.00 |
| TOTALS This Period (last page in this line only)..... | 2375.95 |

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