

# 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

Salmon for Congress

ADDRESS (number and street)

PO Box 1290

Check if different than previously reported. (ACC)

Mesa

AZ

85211-1290

2. FEC IDENTIFICATION NUMBER ▼

C C00495630

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

AZ

05

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

08 / 07 / 2014

through

M M / D D / Y Y Y Y

09 / 30 / 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 David Satterfield

Signature of Treasurer David Satterfield

[Electronically Filed]

Date

M M / D D / Y Y Y Y

10 / 15 / 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

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Salmon 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))....	55796.00	840240.41
(b) Total Contribution Refunds (from Line 20(d)) .....	1000.00	10575.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	54796.00	829665.41
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	41992.87	495698.07
(b) Total Offsets to Operating Expenditures (from Line 14).....	223.09	3025.17
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	41769.78	492672.90
8. Cash on Hand at Close of Reporting Period (from Line 27).....	538848.17	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Salmon 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).....	14600.00	401435.87
(ii) Unitemized.....	2696.00	53304.54
(iii) TOTAL of contributions from individuals ▶	17296.00	454740.41
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	38500.00	385500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	55796.00	840240.41
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	25695.78
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	223.09	3025.17
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	124.89
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	56019.09	869086.25

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	41992.87	495698.07
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	3798.48
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	5000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	5000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	1000.00	7575.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	3000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1000.00	10575.00
21. OTHER DISBURSEMENTS .....	6000.00	12250.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	48992.87	527321.55

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	531821.95
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	56019.09
25. SUBTOTAL (add Line 23 and Line 24).....	587841.04
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	48992.87
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	538848.17

**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 38
	<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)  
**Salmon for Congress**

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

Mailing Address 6094 E. Cholla Drive

City Paradise Valley	State AZ	Zip Code 85253-3032
-------------------------	-------------	------------------------

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

Name of Employer El Dorado Holdings	Occupation Chairman
--	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 26 / 2014

**Transaction ID : AB6EB8DC00ABF4195AE0**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 6453 E. Stallion Rd.

City Paradise Valley	State AZ	Zip Code 85253
-------------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 16 / 2014

**Transaction ID : A537C4E4DE80D458AA6F**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1117 E Marina Lane

City Flagstaff	State AZ	Zip Code 86004-7841
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FEC ID number of contributing federal political committee. **C**

Name of Employer Canyoneers, Inc	Occupation CEO
-------------------------------------	-------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : A84615C2F24834A37832**

Amount of Each Receipt this Period  
100.00

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

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

1350.00

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

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

FOR LINE NUMBER: PAGE 6 OF 38  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Victor Van Damme**

Mailing Address 5113 Patricia Ave.

City Las Vegas State NV Zip Code 89130-2609

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 29 / 2014**

**Transaction ID : AF1216CE765B04465B32**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 101 Ocean Lane Dr. Apt. 1015

City Key Biscayne State FL Zip Code 33149-1448

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

Name of Employer Self Employed Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 27 / 2014**

**Transaction ID : AB795DD841E4B4E41894**

Amount of Each Receipt this Period  
**2500.00**

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

Mailing Address P.O. Box 1144

City Troy State MT Zip Code 59935-1144

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

Name of Employer Chlor Rid Occupation Marketing

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 29 / 2014**

**Transaction ID : AC2A39657C9E04739A6D**

Amount of Each Receipt this Period  
**100.00**

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

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

**2800.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 38
	<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)  
**Salmon for Congress**

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

Mailing Address 64301 E. Squash Blossom Lane

City Tucson	State AZ	Zip Code 85739-1044
----------------	-------------	------------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : AAC4A8479FB964F5E9A1**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 4455 S. James Pl.

City Chandler	State AZ	Zip Code 85248-5146
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FEC ID number of contributing federal political committee. **C**

Name of Employer Fulton Homes	Occupation Owner
----------------------------------	---------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 17 / 2014

**Transaction ID : AE47DA8E31CB64FA1A10**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 26000 Newbridge Dr.

City Los Altos Hills	State CA	Zip Code 94022-2631
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FEC ID number of contributing federal political committee. **C**

Name of Employer Altos Sonoma Corp	Occupation President
---------------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : A03A8D388EEFF45C0A00**

Amount of Each Receipt this Period  
200.00

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

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

2850.00

**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 38
	<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)  
**Salmon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**R. Craig Bryson**

Mailing Address 3800 Sherwood Dr.

City Provo State UT Zip Code 84604-5315

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 14 / 2014

**Transaction ID : AE4BD2E6BE77A4888B29**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 1971 W. Via Del Picamaderos

City Green Valley State AZ Zip Code 85622-5413

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2014

**Transaction ID : AFC02CF3B11C943CEAC8**

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Susan H Ritter**

Mailing Address 313 West Temple Court

City Gilbert State AZ Zip Code 85233-7724

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : A629DFF78DDEA4A35A72**

Amount of Each Receipt this Period  
 1000.00

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

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

2600.00



**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 38
	<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)  
**Salmon for Congress**

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

Mailing Address 13414 N Hawthorn Dr.

City	State	Zip Code
Sun City	AZ	85351-2825

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

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : A150ACB4201EE446BAE**

Amount of Each Receipt this Period  
50.00

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

Mailing Address P.O. Box 36228

City	State	Zip Code
Tucson	AZ	85740-6228

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

Name of Employer	Occupation
Law Office of Sandra S. Froman, PLC	Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : A92C460F244B94BA7991**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 9634 S 157th Pl.

City	State	Zip Code
Gilbert	AZ	85234-5037

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

Name of Employer	Occupation
Self Employed	Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

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

**Transaction ID : A3AD82295B66E4EE3BBF**

Amount of Each Receipt this Period  
250.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 38
	<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)  
**Salmon for Congress**

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

Mailing Address 6507 W. Villa Rita Drive

City State Zip Code  
Glendale AZ 85308-1017

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

Name of Employer Occupation  
Core Construction Services Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : A4B0F193E8188421CA8E**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 126 W. Northview Ave.

City State Zip Code  
Phoenix AZ 85021

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

Name of Employer Occupation  
Cavanaugh Law Group Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 28 / 2014

**Transaction ID : AA4CA4ABF11F24C05A70**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 7631 E. Indian School Rd

City State Zip Code  
Scottsdale AZ 85251-3607

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

Name of Employer Occupation  
Diamondback Drugs Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2014

**Transaction ID : AF2A5593D1A5D4210954**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 38
	<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)  
**Salmon for Congress**

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

Mailing Address 101 W Beck Ln.

City Phoenix State AZ Zip Code 85023-3642

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

Name of Employer: **Premiere Properties Ltd.** Occupation: **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **500.00**

Date of Receipt: **09 / 29 / 2014**

**Transaction ID : A9BEBA53BE615444385B**

Amount of Each Receipt this Period: **250.00**

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

Mailing Address 3320 S. Justin St.

City Flagstaff State AZ Zip Code 86005-8550

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

Name of Employer: **Retired** Occupation: **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **290.00**

Date of Receipt: **09 / 09 / 2014**

**Transaction ID : AA1C004E1D20C4669BFC**

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

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Brady M Miller**

Mailing Address 2838 E. Pistachio St

City Gilbert State AZ Zip Code 85296-7803

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

Name of Employer: **Monkey Depot LLC** Occupation: **General Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **1000.00**

Date of Receipt: **09 / 30 / 2014**

**Transaction ID : A80265A9847CB4261AB4**

Amount of Each Receipt this Period: **1000.00**

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

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

**1350.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 38
	<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)  
**Salmon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Leo E Mahoney**

Mailing Address 2123 E. Firestone Drive

City State Zip Code  
Chandler AZ 85249-4635

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 29 / 2014

**Transaction ID : A1E564C7908DC454AB65**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John M. Haddow**

Mailing Address 13516 Compton Road

City State Zip Code  
Clifton VA 20124-1203

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

Name of Employer Occupation  
Upstream Communications Gov't. relations consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 20 / 2014

**Transaction ID : A73C7B7182465452C829**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1100.00

14600.00

**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 38
	<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)  
**Salmon for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1100 WILSON BLVD  
SUITE 1500

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 04 / 2014

**Transaction ID : AFDD470065C0F4C55BC8**

Amount of Each Receipt this Period  
2500.00

**B. Full Name (Last, First, Middle Initial)**  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00142711**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 19 / 2014

**Transaction ID : A265B18158C084711BFF**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address PO BOX 3535

City Ballwin State MO Zip Code 63022-3535

FEC ID number of contributing federal political committee. **C C00531764**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 17 / 2014

**Transaction ID : A1176D7BC82CB4E36BD3**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

**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 38
	<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)  
**Salmon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF CONVENIENCE STORES POLITICAL ACTION COMMITTEE**

Mailing Address 1600 DUKE STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00126763**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

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

**Transaction ID : A3029A50782894871AC7**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 2900 Clearview Parkway Suite 206

City Metairie State LA Zip Code 70006-6532

FEC ID number of contributing federal political committee. **C C00394957**

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 Y  
 09 / 17 / 2014

**Transaction ID : A25BEA96DBA594C15930**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**SERVICES GROUP OF AMERICA POLITICAL ACTION COMMITTEE**

Mailing Address 16100 N 71ST ST., STE 501

City Scottsdale State AZ Zip Code 85254-2232

FEC ID number of contributing federal political committee. **C C00224618**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 11 / 2014

**Transaction ID : A3365CA56199F4017942**

Amount of Each Receipt this Period  
1000.00

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

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

5500.00

**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 38
	<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)  
**Salmon for Congress**

A. Full Name (Last, First, Middle Initial)  
**EBAY INC-COMMITTEE FOR RESPONSIBLE INTERNET COMMERCE**

Mailing Address **228 S. WASHINGTON ST.  
STE. 115**

City State Zip Code  
**ALEXANDRIA VA 22314**

FEC ID number of contributing federal political committee. **C C00342394**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 23 2014**

Transaction ID : **A0C0B6C6859A4453D91B**

Amount of Each Receipt this Period  
**1000.00**

B. Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address **1200 WILSON BLVD**

City State Zip Code  
**ARLINGTON VA 22209**

FEC ID number of contributing federal political committee. **C C00142711**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **7000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 26 2014**

Transaction ID : **A18770FC1F7264D23B88**

Amount of Each Receipt this Period  
**2000.00**

C. Full Name (Last, First, Middle Initial)  
**NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND**

Mailing Address **11250 WAPLES MILL ROAD**

City State Zip Code  
**FAIRFAX VA 22030**

FEC ID number of contributing federal political committee. **C C00053553**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 13 2014**

Transaction ID : **AD3126D24A3C649189D6**

Amount of Each Receipt this Period  
**1500.00**

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

**4500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 38
	<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)  
**Salmon for Congress**

Full Name (Last, First, Middle Initial)  
VERIZON COMMUNICATIONS INC./VERIZON WIRELESS GOOD GOVERNMENT CLUB (VERIZON/VERIZON WIRELES

**A.** Mailing Address 1300 I ST NW  
STE 400 WEST

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 24 / 2014

**Transaction ID : AFBF5A0C9A5F645E3895**

Amount of Each Receipt this Period  
2000.00

Full Name (Last, First, Middle Initial)  
**ELI LILLY AND COMPANY**

**B.** Mailing Address LILLY COPORATE CENTER

City INDIANAPOLIS State IN Zip Code 46285

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 27 / 2014

**Transaction ID : AFFC90944CD274EC6BDF**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**INTEL CORPORATION POLITICAL ACTION COMMITTEE**

**C.** Mailing Address 1155 F STREET N.W. #1025

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00125641

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 24 / 2014

**Transaction ID : A8E034FF105EF491E9E3**

Amount of Each Receipt this Period  
3000.00

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

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

6000.00



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

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

FOR LINE NUMBER: PAGE 17 OF 38  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 505 9th St. Ste. 800

City Washington State DC Zip Code 20004-2167

FEC ID number of contributing federal political committee. **C C00520569**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 19 / 2014

**Transaction ID : A5E37B88D861F4C19835**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**MANAGEMENT & TRAINING CORP PAC**

Mailing Address P.O. Box 10

City Centerville State UT Zip Code 84014-0010

FEC ID number of contributing federal political committee. **C C00208322**

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  
 08 / 20 / 2014

**Transaction ID : A4B24867172914519BC0**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00142711**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 22 / 2014

**Transaction ID : AE7558D5F12E44A10B98**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

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

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

\_\_\_\_\_ 5000.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 38
	<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)  
**Salmon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MEDTRONIC INC. PAC**

Mailing Address 950 F STREET NW SUITE 500

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00311878**

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  
 09 / 24 / 2014

**Transaction ID : A017DAFA401BD49C383A**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**CAPELLA EDUCATION COMPANY PAC**

Mailing Address 225 South 6th St., 9th Floor

City Minneapolis State MN Zip Code 55402-4319

FEC ID number of contributing federal political committee. **C C00486209**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 05 / 2014

**Transaction ID : A3130F77889EE41399AA**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Eye of the Tiger PAC**

Mailing Address PO Box 2485

City Springfield State VA Zip Code 22152

FEC ID number of contributing federal political committee. **C C00467431**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 17 / 2014

**Transaction ID : A90FF9ECD09D74A7F9CF**

Amount of Each Receipt this Period  
2500.00

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

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

4500.00

**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 38
	<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)  
**Salmon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)**

Mailing Address 2941 FAIRVIEW PARK DR.  
SUITE 100

City State Zip Code  
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 24 / 2014

**Transaction ID : A00A70E215BED42CA83D**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN MOTORCYCLIST POLITICAL ACTION COMMITTEE**

Mailing Address 13515 YARMOUTH DRIVE

City State Zip Code  
PICKERINGTON OH 43147

FEC ID number of contributing federal political committee. **C C00120238**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

**Transaction ID : A68E329BB05CC42D9A78**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**HEALTH NET, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 455 Capitol Mall, Suite 600

City State Zip Code  
Sacramento CA 95814-4439

FEC ID number of contributing federal political committee. **C C00230789**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : A2734EA186E384DB58BE**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

**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 38
	<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)  
**Salmon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NATURAL PRODUCTS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1773 T STREET NW

City WASHINGTON State DC Zip Code 20009

FEC ID number of contributing federal political committee. **C** C00297739

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 01 / 2014

**Transaction ID : A0173FA2807964E82B91**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**EDUCATION MANAGEMENT CORPORATION EMPLOYEE PAC**

Mailing Address 210 Sixth Ave., 33rd Floor

City Pittsburgh State PA Zip Code 15222-2602

FEC ID number of contributing federal political committee. **C** C00466169

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 17 / 2014

**Transaction ID : AD33445DE70674419A00**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 25 MASSACHUSETTS AVENUE, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20001

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

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  
 09 / 01 / 2014

**Transaction ID : A0C0E7A8DB96941BF871**

Amount of Each Receipt this Period  
2000.00

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

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

3500.00

**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 21 OF 38
	<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)  
**Salmon for Congress**

**A.** Full Name (Last, First, Middle Initial)  
WELLS FARGO AND COMPANY EMPLOYEE PAC (AKA WELLS FARGO EMPLOYEE PAC)

Mailing Address SIXTH AND MARQUETTE  
MAC N9305-084

City MINNEAPOLIS State MN Zip Code 55479

FEC ID number of contributing federal political committee. **C** C00034595

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2014

**Transaction ID : A5D623F03ABD147FB972**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2000.00

38500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 38
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 1100 Connecticut Ave NW

City Washington State DC Zip Code 20036-4101

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
434.77

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2014

**Transaction ID : A6EEE67A179B44574969**

Amount of Each Receipt this Period  
223.09

Refund of Bank Fees

**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).....

223.09

223.09

**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 38	
	<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)  
**Salmon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Highground Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 830 N. 4th Ave.		Amount of Each Disbursement this Period 2484.00 <b>Transaction ID : B97F0A944E15D4C0798B</b>
City Phoenix	State AZ	
Zip Code 85003	Purpose of Disbursement Fundraising Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Integrated Web Strategy</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 5330 N. 12th St.		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : B0831F18D21CF4AD58AD</b>
City Phoenix	State AZ	
Zip Code 85014	Purpose of Disbursement Internet Consulting/Hosting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Guerin, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address P.O. Box 2590		Amount of Each Disbursement this Period 12634.50 <b>Transaction ID : BFAAF76AFD7EB425297F</b>
City Alexandria	State VA	
Zip Code 22301	Purpose of Disbursement Fundraising Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	17118.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 38	
	<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)  
**Salmon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Americopy</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2014
Mailing Address 856 E. Main St.		Amount of Each Disbursement this Period 3690.99 <b>Transaction ID : B9D5EE02F67EE43769E6</b>
City Mesa	State AZ	
Zip Code 85203	Purpose of Disbursement Printing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Aristotle</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2014
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 2125.00 <b>Transaction ID : B90E5E067F34749B5B0A</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Campaign Finance Software	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Arent Fox LLP</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2014
Mailing Address 1717 K Street NW		Amount of Each Disbursement this Period 2055.60 <b>Transaction ID : B2EEF34EC9B1340F9B85</b>
City Washington	State DC	
Zip Code 20006-5343	Purpose of Disbursement Legal and FEC Compliance Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7871.59
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 38			
	<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)  
**Salmon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Arent Fox LLP</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 1717 K Street NW		Amount of Each Disbursement this Period 2174.72 <b>Transaction ID : B4B8D7192A831443D8EE</b>
City Washington	State DC Zip Code 20006-5343	
Purpose of Disbursement Legal and FEC Compliance Consulting		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 <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Integrated Web Strategy</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 5330 N. 12th St.		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : B6DB8CE863DE64F439DB</b>
City Phoenix	State AZ Zip Code 85014	
Purpose of Disbursement Internet Consulting/Hosting		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 <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Arizona Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 3501 N. 24th St.		Amount of Each Disbursement this Period 1250.00 <b>Transaction ID : B6D9B36412FF04858A36</b>
City Phoenix	State AZ Zip Code 85016	
Purpose of Disbursement Event Sponsorship		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 <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4924.72
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 38		
	<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)  
**Salmon for Congress**

**A. Wells Fargo**

Full Name (Last, First, Middle Initial)  
Mailing Address 1100 Connecticut Ave NW

City Washington State DC Zip Code 20036-4101

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 11 / 2014

Amount of Each Disbursement this Period: 98.09

Transaction ID : B57010C8A84434E85BD0

**B. Americopy**

Full Name (Last, First, Middle Initial)  
Mailing Address 856 E. Main St.

City Mesa State AZ Zip Code 85203

Purpose of Disbursement Printing Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 15 / 2014

Amount of Each Disbursement this Period: 1232.85

Transaction ID : BCF221F0256054D27B97

**C. Summit Consulting Group**

Full Name (Last, First, Middle Initial)  
Mailing Address 3230 E Broadway Rd. Ste C-260

City Phoenix State AZ Zip Code 85040-2873

Purpose of Disbursement Campaign Sign Installation and Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 16 / 2014

Amount of Each Disbursement this Period: 857.70

Transaction ID : BF81624AF39F949B9BE9

**SUBTOTAL** of Disbursements This Page (optional) ..... 2188.64

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 38			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 5555 Hilton Ave Ste 106		Amount of Each Disbursement this Period 285.34 <b>Transaction ID : B37CB367776C5493FA07</b>
City Baton Rouge	State LA	
Purpose of Disbursement Credit Card Processing Fees		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 <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Chase Credit Card</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address P.O Box 659754		Amount of Each Disbursement this Period 4375.42 <b>Transaction ID : BD5BFC1421B6C48EB9ED</b>
City San Antonio	State TX	
Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW		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 <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. Advantage Car</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 3900 NW 25th St Suite 404		Amount of Each Disbursement this Period 332.85 <b>Transaction ID : B138C2B526F084A9BB89</b> <b>[MEMO ITEM]</b>
City Miami	State FL	
Purpose of Disbursement Car Rental		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 <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4660.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 38	
	<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)  
**Salmon for Congress**

Full Name (Last, First, Middle Initial) <b>A. US Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 4000 E. Sky Harbor Blvd.		Amount of Each Disbursement this Period 1004.00
City Phoenix	State AZ	
Zip Code 85034	Purpose of Disbursement Air Travel	Transaction ID : <b>B219CB48F92F1468F9B6</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Canyons</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 4000 The Canyons Resort Drive		Amount of Each Disbursement this Period 597.35
City Park City	State UT	
Zip Code 84098	Purpose of Disbursement Catering	Transaction ID : <b>BB5431B2747884635AA4</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Gilbert Road Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 405 N Gilbert Road		Amount of Each Disbursement this Period 65.10
City Gilbert	State AZ	
Zip Code 85295	Purpose of Disbursement Storage Fees	Transaction ID : <b>BC55479FB15844AB6997</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 38	
	<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)  
**Salmon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Postino</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 302 N Gilbert Road		Amount of Each Disbursement this Period 88.84
City Gilbert	State AZ	
Zip Code 85234	Purpose of Disbursement Meals	Transaction ID : <b>B95B7569342634450B42</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 4200 S Arizona Avenue		Amount of Each Disbursement this Period 382.24
City Chandler	State AZ	
Zip Code 85248	Purpose of Disbursement Telecommunication Expense	Transaction ID : <b>B3B16443545434E1F995</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Hyatt Hotels</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 122 N 2nd St		Amount of Each Disbursement this Period 185.88
City Phoenix	State AZ	
Zip Code 85004	Purpose of Disbursement Lodging	Transaction ID : <b>BCF38CFC6635440EB856</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 38	
	<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)  
**Salmon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 300 First St. S.E.		Amount of Each Disbursement this Period 1144.23
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Meals and Meeting Expenses	Transaction ID : <b>B6448273EE5F84A7BBCF</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Circle K</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 1010 E Chandler Blvd		Amount of Each Disbursement this Period 52.66
City Chandler	State AZ	
Zip Code 85225	Purpose of Disbursement Fuel	Transaction ID : <b>B9CEAA7D593BE44AD942</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Quick Time</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 517 W. MCKELLIPS RD.		Amount of Each Disbursement this Period 181.69
City Mesa	State AZ	
Zip Code 85201	Purpose of Disbursement Fuel	Transaction ID : <b>B703E1FAEC45F4149AC2</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 38			
	<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)  
**Salmon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Chase Credit Card</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address P.O Box 659754		Amount of Each Disbursement this Period 3474.47 <b>Transaction ID : B0A5B007638A048D0BA2</b>
City San Antonio State TX Zip Code 78265-9754	Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 300 First St. S.E.		Amount of Each Disbursement this Period 232.25 <b>Transaction ID : BFE4C30159CF84AB1ABB</b> <b>[MEMO ITEM]</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Meals	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Gilbert Road Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 405 N Gilbert Road		Amount of Each Disbursement this Period 65.10 <b>Transaction ID : B47C07E25D04D4EA09E7</b> <b>[MEMO ITEM]</b>
City Gilbert State AZ Zip Code 85295	Purpose of Disbursement Storage Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3474.47
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 38			
	<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)  
**Salmon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Al's Gourmet Pizza</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 382 East Capitol St SE Washington		Amount of Each Disbursement this Period 85.16
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Meals	Transaction ID : B220A461326764F398AC
Candidate Name	Category/Type	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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>B. Zest American Bistro</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 735 8th St. SE		Amount of Each Disbursement this Period 362.60
City Washington	State DC	
Zip Code 20003-2802	Purpose of Disbursement Catering/Meals	Transaction ID : BAC04AC966CC64AAA9D0
Candidate Name	Category/Type	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	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>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 221.54
City Dallas	State TX	
Zip Code 75266-0108	Purpose of Disbursement Telecommunication Expense	Transaction ID : B08AC5947F03D4C0EB46
Candidate Name	Category/Type	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 38			
	<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)  
**Salmon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Talay Thai</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014	
Mailing Address 406 1st St SE			Amount of Each Disbursement this Period 67.87	
City Washington	State DC	Zip Code 20003	Transaction ID : B85AEB1B243A64269AD1	
Purpose of Disbursement Meals		Candidate Name	[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		

Full Name (Last, First, Middle Initial) <b>B. US Airways</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014	
Mailing Address 1 Aviation Cir			Amount of Each Disbursement this Period 1908.80	
City Washington	State DC	Zip Code 20001	Transaction ID : B9B177740FBE1448886E	
Purpose of Disbursement Air Travel		Candidate Name	[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		

Full Name (Last, First, Middle Initial) <b>c. Cava Mezze</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014	
Mailing Address 527 8th St SE			Amount of Each Disbursement this Period 369.76	
City Washington	State DC	Zip Code 20003	Transaction ID : B474BAFB62FAA41B2923	
Purpose of Disbursement Catering/Meals		Candidate Name	[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		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 38	
	<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)  
**Salmon for Congress**

Full Name (Last, First, Middle Initial) <b>A. District Taco</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014	
Mailing Address 656 Pennsylvania Ave. SE			Amount of Each Disbursement this Period 42.39	
City Washington	State DC	Zip Code 20003-4304	Transaction ID : <b>BD616FB50DAA74B92A8F</b>	
Purpose of Disbursement Meals		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]		

Full Name (Last, First, Middle Initial) <b>B. Guerin, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014	
Mailing Address P.O. Box 2590			Amount of Each Disbursement this Period 1483.19	
City Alexandria	State VA	Zip Code 22301	Transaction ID : <b>BDE9C022A00F646C38D9</b>	
Purpose of Disbursement Expense Reimbursement: See Below		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Zest American Bistro</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014	
Mailing Address 735 8th St. SE			Amount of Each Disbursement this Period 213.15	
City Washington	State DC	Zip Code 20003-2802	Transaction ID : <b>BEB67E544E4BA46D6BB9</b>	
Purpose of Disbursement Meals/Catering		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1483.19
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 38			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) <b>A. FedEx</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2014
Mailing Address 2241 Eisenhower Ave		Amount of Each Disbursement this Period \$ 56.10
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Shipping Costs	Transaction ID : B95143B195E6B4838A1B
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) <b>B. MJ Valet</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2014
Mailing Address 1425 K Street, NW #350		Amount of Each Disbursement this Period \$ 110.00
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Valet Services	Transaction ID : B68ABA33A18474CA5B3D
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) <b>C. American Trucking Associations</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2014
Mailing Address PO Box 101360		Amount of Each Disbursement this Period \$ 750.00
City Arlington	State VA	
Zip Code 22210-4360	Purpose of Disbursement Catering and Rental Fees	Transaction ID : BE79C4CBABB7F44ACAF2
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	\$ 0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 38			
	<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)  
**Salmon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 300 First St. S.E.		Amount of Each Disbursement this Period 7.22
City Washington State DC Zip Code 20003	Purpose of Disbursement Meals	
Candidate Name	Category/Type	Transaction ID : BE3DF820D43E140C79C5 <b>[MEMO ITEM]</b>
Office Sought: House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 5382 S. Power Road		Amount of Each Disbursement this Period 214.61
City Gilbert State AZ Zip Code 85296	Purpose of Disbursement Office Supplies	
Candidate Name	Category/Type	Transaction ID : B36B72C1B57124A8EA40 <b>[MEMO ITEM]</b>
Office Sought: House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Trader Joe's</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 612 N. Sain Asaph Street		Amount of Each Disbursement this Period 202.39
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Meals and Catering Costs	
Candidate Name	Category/Type	Transaction ID : B35E4F1D6BC06478CB6F <b>[MEMO ITEM]</b>
Office Sought: House Senate President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	41721.87

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 38			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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

Full Name (Last, First, Middle Initial) <b>A. Donald Kwasman</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2014
Mailing Address 7268 N Cathedral Rock Rd		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : B1421F5A3D8084D91AF2</b>
City Tuscon	State AZ	
Zip Code 85718	Purpose of Disbursement Refund: Refund of Contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
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	
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
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	
Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	1000.00

**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 38 OF 38
	<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)  
**Salmon for Congress**

Full Name (Last, First, Middle Initial) <b>A. Andy Tobin for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 2532 NORTH 4TH STREET #528		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : BDED2B5661DD141DDBEF</b>
City Flagstaff	State AZ Zip Code 86004-3712	
Purpose of Disbursement Political Contribution	Category/Type	
Candidate Name <b>Andy Tobin for Congress</b>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. WENDYROGERS.ORG</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 3030 S RURAL RD SUITE 120		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : B02D906D2AAF34545A96</b>
City Tempe	State AZ Zip Code 85282-3800	
Purpose of Disbursement Political Contribution	Category/Type	
Candidate Name <b>WENDYROGERS.ORG</b>	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>C. MCSALLY FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address PO BOX 18612		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : B46DC4C5030F74AAABD5</b>
City TUCSON	State AZ Zip Code 85731	
Purpose of Disbursement Political Contribution	Category/Type	
Candidate Name	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	6000.00