

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

JOYCE MCDONALD FOR CONGRESS

ADDRESS (number and street)

PO BOX 1225

Check if different than previously reported. (ACC)

PUYALLUP

WA

98371

2. **FEC IDENTIFICATION NUMBER**

C C00560342

CITY

STATE

ZIP CODE

STATE DISTRICT

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

WA

10

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

(a) Quarterly Reports:

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

Termination Report (TER)

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

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

Election on / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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

Type or Print Name of Treasurer GARY MCDONALD

Signature of Treasurer GARY MCDONALD

[Electronically Filed]

Date

/ /

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
JOYCE MCDONALD 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))....	33106.00	68331.01
(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)).....	33106.00	68331.01
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	13841.59	49079.99
(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)).....	13841.59	49079.99
8. Cash on Hand at Close of Reporting Period (from Line 27).....	20251.02	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

JOYCE MCDONALD 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).....	26905.00	47434.00
(ii) Unitemized.....	5401.00	15097.01
(iii) TOTAL of contributions from individuals ▶	32306.00	62531.01
(b) Political Party Committees.....	800.00	800.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	33106.00	68331.01
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	3500.00	3500.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	3500.00	3500.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	1000.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	36606.00	72831.01

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	13841.59	49079.99
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	3500.00	3500.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	3500.00	3500.00
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) ►	17341.59	52579.99

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	986.61
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	36606.00
25. SUBTOTAL (add Line 23 and Line 24).....	37592.61
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17341.59
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	20251.02

**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 30
	<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)
JOYCE MCDONALD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GARY AARDAPPEL

Mailing Address 9202 144TH ST E

City PUYALLUP State WA Zip Code 98375

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : SA11AI.4721

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. CURTIS ANDERSON

Mailing Address 1 STADIUM WAY NO. 3

City TACOMA State WA Zip Code 98403

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 **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : SA11AI.4715

Amount of Each Receipt this Period
200.00

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

Mailing Address PO BOX 731487
16811 139TH AVE E

City PUYALLUP State WA Zip Code 98374

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

Name of Employer SOUTH SOUND 911 Occupation MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : SA11AI.4593

Amount of Each Receipt this Period
250.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 30
	<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)
JOYCE MCDONALD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROBERT FARRELL

Mailing Address 1286 O'NEIL CY

City State Zip Code
DUPONT WA 98327

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

Name of Employer Occupation
UNKNOWN UNKNOWN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11AI.4888

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. ANDY FRICKEL

Mailing Address 20825 ST ROUTE 410 E
#182

City State Zip Code
BONNEY LAKE WA 98391

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

Name of Employer Occupation
SELF EMPLOYED RED ROVER MARKET MARKETING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 31 2014

Transaction ID : SA11AI.4898

Amount of Each Receipt this Period
2600.00

In-kind - WEB SITE HOSTING

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

Mailing Address 409 EAST PIONEER

City State Zip Code
PUYALLUP WA 98372

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

Name of Employer Occupation
AZURE GREEN CONSULTANTS ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 08 2014

Transaction ID : SA11AI.4727

Amount of Each Receipt this Period
100.00

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

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

3200.00

**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 30
	<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)
JOYCE MCDONALD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAVID HALEY

Mailing Address **PO BOX 65349**

City **TACOMA** State **WA** Zip Code **98464**

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

Name of Employer **SELF EMPLOYED** 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
09 / 22 / 2014

Transaction ID : SA11AI.4679

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
CARL HOGAN

Mailing Address **3511 124TH AVE CT E**

City **EDGEWOOD** State **WA** Zip Code **98372**

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

Name of Employer **WA STATE FAIR** Occupation **BOARDMEMBER / 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 / 22 / 2014

Transaction ID : SA11AI.4681

Amount of Each Receipt this Period
500.00

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

Mailing Address **1623 ARAB DRIVE SE**

City **OLYMPIA** State **WA** Zip Code **98501**

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

Name of Employer **SELF EMPLOYED** Occupation **ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

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

Transaction ID : SA11AI.4763

Amount of Each Receipt this Period
100.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 30
	<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)
JOYCE MCDONALD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROGER KNUTSON

Mailing Address 16406 78TH ST E

City SUMNER State WA Zip Code 98390

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : SA11AI.4691

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
ROGER KNUTSON

Mailing Address 16406 78TH ST E

City SUMNER State WA Zip Code 98390

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.4735

Amount of Each Receipt this Period
 500.00

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

Mailing Address 5411 65TH AVE W

City UNIVERSITY PLACE State WA Zip Code 98467

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

Name of Employer GLG PLLC Occupation ATTORNEY

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 : SA11AI.4893

Amount of Each Receipt this Period
 250.00

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 9 OF 30
	<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)
JOYCE MCDONALD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DOUGLAS LEMAY

Mailing Address **PO BOX 44645**

City **TACOMA** State **WA** Zip Code **98448-0645**

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

Name of Employer **LEMAY ENTERPRISES** Occupation **BUSINESS 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
08 / 01 / 2014

Transaction ID : SA11AI.4610

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
LIZ LEMAY

Mailing Address **PO BOX 44486**

City **TACOMA** State **WA** Zip Code **98448**

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 **5800.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : SA11AI.4711

Amount of Each Receipt this Period
5800.00

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

Mailing Address **PO BOX 44667**

City **TACOMA** State **WA** Zip Code **98448**

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 **2600.00**

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

Transaction ID : SA11AI.4655

Amount of Each Receipt this Period
2600.00

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

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

8900.00

**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 30
	<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)
JOYCE MCDONALD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NORMAN LEMAY

Mailing Address 1302 19TH ST CT NW

City State Zip Code
GIG HARBOR WA 98335

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
08 / 10 / 2014

Transaction ID : SA11AI.4751

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Ms BARBARA LEMAY-QUINN

Mailing Address 14116 SCOTT TURNER RD

City State Zip Code
EATONVILLE WA 98328

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2014

Transaction ID : SA11AI.4710

Amount of Each Receipt this Period
500.00

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

Mailing Address 8137 KERBAUGH RD NE

City State Zip Code
OLYMPIA WA 98516

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11AI.4764

Amount of Each Receipt this Period
500.00

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

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

1300.00

**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 30
	<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)
JOYCE MCDONALD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PATRICIA LUMRY

Mailing Address **PO BOX 6847**

City **BELLEVUE** State **WA** Zip Code **98008**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

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

Transaction ID : SA11Al.4872

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
RUFUS LUMRY

Mailing Address **PO BOX 6847**

City **BELLEVUE** State **WA** Zip Code **98008**

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

Name of Employer **ACORN VENTURES** Occupation **PRINCIPLE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

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

Transaction ID : SA11Al.4870

Amount of Each Receipt this Period
2600.00

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

Mailing Address **1941 26 AVE E**

City **SEATTLE** State **WA** Zip Code **98112**

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

Name of Employer **LUND CONSULTING** Occupation **MANAGEMENT CONSULTANT**

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 / 13 / 2014

Transaction ID : SA11Al.4863

Amount of Each Receipt this Period
250.00

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

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

5450.00

**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 30
	<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)
JOYCE MCDONALD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. WALLY NASH

Mailing Address 13408 110TH ST CT E

City PUYALLUP State WA Zip Code 98374

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
1200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.4862

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Chris Pallis

Mailing Address 10900 NE 4th ST Ste 1550

City Bellevue State WA Zip Code 98004

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

Name of Employer Business Owner FRETOC LLC Occupation Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.4704

Amount of Each Receipt this Period
1000.00

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

Mailing Address 7912 122ND ST E

City PUYALLUP State WA Zip Code 98373

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

Name of Employer RETIRED Occupation RETIRED 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
 09 / 13 / 2014

Transaction ID : SA11AI.4865

Amount of Each Receipt this Period
250.00

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

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

2250.00

**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 13 OF 30

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NAME OF COMMITTEE (In Full)
JOYCE MCDONALD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DOUGLAS ROBERTSON

Mailing Address 11012 CANYON RD E STE 8 PMB 388

City PUYSELLUP State WA Zip Code 98373

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
 205.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 08 / 2014

Transaction ID : SA11AI.4723

Amount of Each Receipt this Period
 30.00

B. Full Name (Last, First, Middle Initial)
DOUGLAS ROBERTSON

Mailing Address 11012 CANYON RD E STE 8 PMB 388

City PUYSELLUP State WA Zip Code 98373

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
 230.00

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

Transaction ID : SA11AI.4657

Amount of Each Receipt this Period
 25.00

C. Full Name (Last, First, Middle Initial)
Ms KATHLEEN SLAYER

Mailing Address 10018 22ND AVE E

City TACOMA State WA Zip Code 98445

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
 300.00

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

Transaction ID : SA11AI.4652

Amount of Each Receipt this Period
 100.00

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

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

155.00

**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 30
	<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)
JOYCE MCDONALD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ROBERT STEWART		Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2014	
Mailing Address 2655 SW 164TH PL		Transaction ID : SA11AI.4738	
City BURIEN	State WA	Zip Code 98166	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. ROBERT STEWART		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2014	
Mailing Address 2655 SW 164TH PL		Transaction ID : SA11AI.4877	
City BURIEN	State WA	Zip Code 98166	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. GIGI TALCOTT		Date of Receipt M M / D D / Y Y Y Y 09 / 02 / 2014	
Mailing Address 1320 SUNSET DR S		Transaction ID : SA11AI.4694	
City TACOMA	State WA	Zip Code 98465	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer SELF EMPLOYED	Occupation CONSULTANT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

SUBTOTAL of Receipts This Page (optional).....	1100.00
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 15 OF 30
	<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)
JOYCE MCDONALD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EDWARD TROBAUGH

Mailing Address 73 CHAPMAN CT

City State Zip Code
STEILACOOM WA 98388

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

Name of Employer Occupation
NONE RETIRED MAJOR GENERAL

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
09 / 22 / 2014

Transaction ID : SA11AI.4675

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
DEBBIE ZEVENBERGEN

Mailing Address 1710 8TH AVE SW

City State Zip Code
PUYALLUP WA 98371

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11AI.4649

Amount of Each Receipt this Period
500.00

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).....

550.00

26905.00

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

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

FOR LINE NUMBER: PAGE 16 OF 30
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
JOYCE MCDONALD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
REPUBLICAN 27TH LEGISLATIVE DISTRICT GOP

Mailing Address 3715 N 27TH ST

City TACOMA State WA Zip Code 98407

FEC ID number of contributing federal political committee. **C** C00031088

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11B.4650

Amount of Each Receipt this Period
 800.00

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).....

800.00

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 17 OF 30
	<input type="checkbox"/> 11a 12 <input checked="" 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)
JOYCE MCDONALD FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOYCE MCDONALD FOR CONGRESS

Mailing Address PO BOX 1225

City PUYALLUP State WA Zip Code 98371

FEC ID number of contributing federal political committee. **C** C00560342

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : SA13A.4609

Amount of Each Receipt this Period
 3000.00

B. Full Name (Last, First, Middle Initial)
JOYCE MCDONALD FOR CONGRESS

Mailing Address PO BOX 1225

City PUYALLUP State WA Zip Code 98371

FEC ID number of contributing federal political committee. **C** C00560342

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2014

Transaction ID : SA13A.4896

Amount of Each Receipt this Period
 500.00

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).....

3500.00

3500.00

**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 18 OF 30		
	<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)
JOYCE MCDONALD FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. ALLIED COMMUNICATION STRATEGIES

Mailing Address PO BOX 4131

City TUMWATER State WA Zip Code 98501

Purpose of Disbursement CAMPAIGN MAILING SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 25 / 2014

Amount of Each Disbursement this Period: 2705.57

Transaction ID : SB17.4910

Category/Type: 001

Full Name (Last, First, Middle Initial)
B. CONSTANT CONTACT

Mailing Address 1601 TRAPELO ROAD SUITE 329

City WALTHAM State MA Zip Code 02451

Purpose of Disbursement WEB SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 28 / 2014

Amount of Each Disbursement this Period: 60.17

Transaction ID : SB17.4911

Category/Type: 001

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

Mailing Address 1601 TRAPELO ROAD SUITE 329

City WALTHAM State MA Zip Code 02451

Purpose of Disbursement CAMPAIGN EMAIL SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 27 / 2014

Amount of Each Disbursement this Period: 60.17

Transaction ID : SB17.4928

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 2825.91

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 30			
	<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)
JOYCE MCDONALD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CONSTANT CONTACT		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 1601 TRAPELO ROAD SUITE 329		Amount of Each Disbursement this Period 65.64 Transaction ID : SB17.4953
City WALTHAM State MA Zip Code 02451	Purpose of Disbursement CAMPAIGN EMAIL SERVICES 001 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. Mr. ANDY FRICKEL		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2014
Mailing Address 20825 ST ROUTE 410 E #182		Amount of Each Disbursement this Period 2600.00 Transaction ID : SB17.4900
City BONNEY LAKE State WA Zip Code 98391	Purpose of Disbursement In-kind - WEB SITE HOSTING 001 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) C. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 3715 S MERIDIAN		Amount of Each Disbursement this Period 53.11 Transaction ID : SB17.4935
City PUYALLUP State WA Zip Code 98373	Purpose of Disbursement MAILING SUPPLIES 006 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:		

SUBTOTAL of Disbursements This Page (optional).....	2718.75
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 20 OF 30	
	<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)
JOYCE MCDONALD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 3715 S MERIDIAN		Amount of Each Disbursement this Period 143.81 Transaction ID : SB17.4947
City PUYALLUP State WA Zip Code 98373	Purpose of Disbursement MAILING SUPPLIES Candidate Name Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 3715 S MERIDIAN		Amount of Each Disbursement this Period 99.21 Transaction ID : SB17.4950
City PUYALLUP State WA Zip Code 98373	Purpose of Disbursement MAILING SUPPLIES Candidate Name Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PACIFIC WELDING		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 2902 S. M ST		Amount of Each Disbursement this Period 12.31 Transaction ID : SB17.4916
City TACOMA State WA Zip Code 98409	Purpose of Disbursement HELIUM Candidate Name Category/Type 007	
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:		

SUBTOTAL of Disbursements This Page (optional).....	255.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 30		
	<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)
JOYCE MCDONALD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PACIFIC WELDING		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 2902 S. M ST		Amount of Each Disbursement this Period 12.31 Transaction ID : SB17.4939
City TACOMA State WA Zip Code 98409	Purpose of Disbursement EVENT SUPPLIES 007 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. PCRP		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2014
Mailing Address 10029 SOUTH TACOMA WAY		Amount of Each Disbursement this Period 90.00 Transaction ID : SB17.4922
City LAKEWOOD State WA Zip Code 98499	Purpose of Disbursement EVENT EXPENSE 007 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) C. POSTMASTER		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 204 2ND ST SW		Amount of Each Disbursement this Period 49.00 Transaction ID : SB17.4917
City PUYALLUP State WA Zip Code 98371	Purpose of Disbursement POSTAGE 003 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:		

SUBTOTAL of Disbursements This Page (optional).....	151.31
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 30		
	<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)
JOYCE MCDONALD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. POSTMASTER		Date of Disbursement MM / DD / YYYY 08 / 13 / 2014
Mailing Address 204 2ND ST SW		Amount of Each Disbursement this Period 49.00 Transaction ID : SB17.4918
City PUYALLUP	State WA	
Zip Code 98371	Purpose of Disbursement POSTAGE	Category/ Type 003
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. POSTMASTER		Date of Disbursement MM / DD / YYYY 08 / 14 / 2014
Mailing Address 204 2ND ST SW		Amount of Each Disbursement this Period 49.00 Transaction ID : SB17.4920
City PUYALLUP	State WA	
Zip Code 98371	Purpose of Disbursement POSTAGE	Category/ Type 003
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) C. POSTMASTER		Date of Disbursement MM / DD / YYYY 09 / 15 / 2014
Mailing Address 204 2ND ST SW		Amount of Each Disbursement this Period 98.00 Transaction ID : SB17.4943
City PUYALLUP	State WA	
Zip Code 98371	Purpose of Disbursement POSTAGE	Category/ Type 003
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)	

SUBTOTAL of Disbursements This Page (optional).....	196.00
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 23 OF 30	
	<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)
JOYCE MCDONALD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. POSTMASTER		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 204 2ND ST SW		Amount of Each Disbursement this Period 98.00 Transaction ID : SB17.4944
City PUYALLUP	State WA	
Zip Code 98371	Purpose of Disbursement POSTAGE	Category/ Type 004
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. POSTMASTER		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 204 2ND ST SW		Amount of Each Disbursement this Period 49.00 Transaction ID : SB17.4949
City PUYALLUP	State WA	
Zip Code 98371	Purpose of Disbursement POSTAGE	Category/ Type 003
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) C. PRINT NORTHWEST		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 9914 32ND AVE S		Amount of Each Disbursement this Period 472.30 Transaction ID : SB17.4903
City TACOMA	State WA	
Zip Code 98499	Purpose of Disbursement MAIL SERVICES	Category/ Type 006
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:	

SUBTOTAL of Disbursements This Page (optional).....	619.30
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 30	
	<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)
JOYCE MCDONALD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PRINT NORTHWEST		Date of Disbursement MM / DD / YYYY 08 / 14 / 2014
Mailing Address 9914 32ND AVE S		Amount of Each Disbursement this Period 2868.46 Transaction ID : SB17.4919
City TACOMA State WA Zip Code 98499	Purpose of Disbursement PRINTING SERVICES Category/Type 006	
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. PRINT NORTHWEST		Date of Disbursement MM / DD / YYYY 09 / 26 / 2014
Mailing Address 9914 32ND AVE S		Amount of Each Disbursement this Period 752.67 Transaction ID : SB17.4948
City TACOMA State WA Zip Code 98499	Purpose of Disbursement SIGNS Category/Type 006	
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) C. STRATEGIC COMMUNICATIONS GROUP		Date of Disbursement MM / DD / YYYY 09 / 10 / 2014
Mailing Address 1207 WILLIAMS CT NW		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.4940
City ORTING State WA Zip Code 98360	Purpose of Disbursement CONSULTING FEE Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5621.13
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 30	
	<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)
JOYCE MCDONALD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STRATEGIC COMMUNICATIONS GROUP		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 1207 WILLIAMS CT NW		Amount of Each Disbursement this Period 238.20
City ORTING State WA Zip Code 98360	Purpose of Disbursement REIMBURSEMENT FOR EXPENSES 001 Category/Type	
Candidate Name		Transaction ID : SB17.4954
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. THOMPSON SIGNS		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 4706 PACIFIC AVE SE		Amount of Each Disbursement this Period 329.69
City LACEY State WA Zip Code 98503	Purpose of Disbursement 004 Category/Type	
Candidate Name		Transaction ID : SB17.4907
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. THOMPSON SIGNS		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 4706 PACIFIC AVE SE		Amount of Each Disbursement this Period 10.00
City LACEY State WA Zip Code 98503	Purpose of Disbursement 004 Category/Type	
Candidate Name		Transaction ID : SB17.4908
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	577.89
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 30	
	<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)
JOYCE MCDONALD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WELLS FARGO		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 431 39TH AVE SW		Amount of Each Disbursement this Period 43.68 Transaction ID : SB17.4974
City PUYALLUP State WA Zip Code 98373	Purpose of Disbursement BANK FEES 001 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. WELLS FARGO		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 431 39TH AVE SW		Amount of Each Disbursement this Period 35.00 Transaction ID : SB17.4921
City PUYALLUP State WA Zip Code 98373	Purpose of Disbursement BANKING FEES 001 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) C. WELLS FARGO		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 431 39TH AVE SW		Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.4973
City PUYALLUP State WA Zip Code 98373	Purpose of Disbursement TRANSACTION FEE 001 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:		

SUBTOTAL of Disbursements This Page (optional).....	98.68
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 30		
	<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)
JOYCE MCDONALD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WELLS FARGO		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address 431 39TH AVE SW		Amount of Each Disbursement this Period 83.68 Transaction ID : SB17.4976
City PUYALLUP State WA Zip Code 98373	Purpose of Disbursement BANK FEE Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. WELLS FARGO		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 431 39TH AVE SW		Amount of Each Disbursement this Period 57.49 Transaction ID : SB17.4975
City PUYALLUP State WA Zip Code 98373	Purpose of Disbursement BANK FEE Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement 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:		

SUBTOTAL of Disbursements This Page (optional).....	141.17
TOTAL This Period (last page this line number only).....	13205.47

**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 30	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
JOYCE MCDONALD FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JOYCE MCDONALD FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address PO BOX 1225		Amount of Each Disbursement this Period 500.00 Transaction ID : SB19A.4971
City PUYALLUP State WA Zip Code 98371	Purpose of Disbursement LOAN REPAYMENT Category/Type 009	
Candidate Name JOYCE MCDONALD FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: WA District: 10		

Full Name (Last, First, Middle Initial) B. JOYCE MCDONALD FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address PO BOX 1225		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB19A.4968
City PUYALLUP State WA Zip Code 98371	Purpose of Disbursement LOAN REPAYMENT Category/Type 009	
Candidate Name JOYCE MCDONALD FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: WA District: 10		

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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3500.00
TOTAL This Period (last page this line number only).....	3500.00

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **JOYCE MCDONALD FOR CONGRESS** Transaction ID : **SC/10.4609**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2014
JOYCE MCDONALD FOR CONGRESS
 Primary
 General
 Other (specify) ▼

Mailing Address
 PO BOX 1225
 City State ZIP Code
 PUYALLUP WA 98371

Original Amount of Loan 3000.00	Cumulative Payment To Date 3000.00	Balance Outstanding at Close of This Period 0.00
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TERMS
 Date Incurred: M 07 / D 31 / Y 2014
 Date Due: M / D / Y 12/31/2014
 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)..... ▶ [] 0.00
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/10.4896**
JOYCE MCDONALD FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial) JOYCE MCDONALD FOR CONGRESS	Election: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 1225	

City	State	ZIP Code
PUYALLUP	WA	98371

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

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
08 / 15 / 2014	12/31/2014	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).....	[] 0.00
TOTALS This Period (last page in this line only).....	[] 0.00

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