

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

SECRETARY OF THE SENATE
07 DEC 14 PM 1:05

Office Use Only

1. NAME OF
COMMITTEE (in full)

USE FEC MAILING LABEL
OR TYPE OR PRINT ▼

Example: If typing, type
over the lines

Friends of Maria

ADDRESS (number and street)

PO Box 12740



Check if different
than previously
reported. (ACC)

Seattle

WA

98111

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00349506

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

WA

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

04

01

2007

through

06

30

2007

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 Jay Petterson, Treasurer

Signature of Treasurer

J. Petterson

Date

12

08

2007

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)

27020400029

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Friends of Maria

Report Covering the Period:

From:

MM
04

DD
01

YYYYYY
2007

To:

MM
06

DD
30

YYYYYY
2007

	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)).....	114012.33	188857.28
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	9966.67
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	114012.33	178890.61
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	107091.28	910962.55
(b) Total Offsets to Operating Expenditures (from Line 14).....	26355.49	68096.29
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	80735.79	842866.26
8. Cash on Hand at Close of Reporting Period (from Line 27).....	67561.02	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	2349379.63	

For further information contact:

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

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

27020400030

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name
Friends of Maria

Report Covering the Period:

From:

M M D D Y Y Y Y
0 4 0 1 2 0 0 7

To:

M M D D Y Y Y Y
0 6 3 0 2 0 0 7

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).....

76239.00

86190.00

- (ii) Unitemized.....
(iii) TOTAL of contributions

37773.33

96387.28

from individuals..... ►

114012.33

182577.28

- (b) Political Party Committees.....

0.00

0.00

- (c) Other Political Committees
(such as PACS).....

0.00

6280.00

- (d) The Candidate.....

0.00

0.00

- (e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))

114012.33

188857.28

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

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.).....

26355.49

68096.29

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ►

140367.82

256953.57

27020400031

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	107091.28	910962.55
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	9566.67
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	400.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	9966.67
21. OTHER DISBURSEMENTS.....	15275.00	15275.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) >	122366.28	936204.22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	49559.48
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	140367.82
25. SUBTOTAL (add Line 23 and Line 24).....	189927.30
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	122366.28
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	67561.02

27020400032

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 5 / 102	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Mr. Daniel M. Adamson Mailing Address 9200 Bradford Rd City State Zip Code Silver Spring MD 20901 FEC ID number of contributing federal political committee. C Name of Employer Davis Wright Tremaine LLP Occupation Attorney Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA119590-003 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Mr. Ike Alhadeff Mailing Address PO Box 19435 City State Zip Code Seattle WA 98109 FEC ID number of contributing federal political committee. C Name of Employer ABC Pacific Corp Occupation Investments Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 04 / 23 / 2007 Transaction ID: SA120471-008 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Mr. Ike Alhadeff Mailing Address PO Box 19435 City State Zip Code Seattle WA 98109 FEC ID number of contributing federal political committee. C Name of Employer ABC Pacific Corp Occupation Investments Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 06 / 15 / 2007 Transaction ID: SA120471-009 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number only)		

27020400033

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Mr. Zak A. Andersen Mailing Address 1444 Church St NW Apt 302 City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. C Name of Employer The Gallatin Group Occupation Principal Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA140160-003 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Ms. Evangeline E. Anderson Mailing Address 5468 Lake Washington Blvd SE City Bellevue State WA Zip Code 98006 FEC ID number of contributing federal political committee. C Name of Employer Renton Tech College Occupation Teacher Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 250.00		Date of Receipt MM / DD / YYYY 06 / 13 / 2007 Transaction ID: SA105927-011 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Inge Andreassen Mailing Address 5307 1st Ave NW City Seattle State WA Zip Code 98107 FEC ID number of contributing federal political committee. C Name of Employer American Seafoods Co. Occupation President Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00		Date of Receipt MM / DD / YYYY 06 / 12 / 2007 Transaction ID: SA175888-002 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		1250.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Mr. J. Gordon Arbuckle Mailing Address PO Box 19670 840 Pearl St., Ste. A City Boulder State CO Zip Code 80308 FEC ID number of contributing federal political committee. C Name of Employer Patton Boggs Occupation Attorney Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 7200.00		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA112656-011 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Ms. Sarah Armstrong Mailing Address 600 Hillside Dr E City Seattle State WA Zip Code 98112 FEC ID number of contributing federal political committee. C Name of Employer None Occupation Student Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA107834-006 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Mr. Scott Armstrong Mailing Address 600 Hillside Dr E City Seattle State WA Zip Code 98112 FEC ID number of contributing federal political committee. C Name of Employer Group Health Cooperative Occupation CEO Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA107834-005 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		2000.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 8 / 102	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Mr. Michael M. Atterberry Mailing Address 1514 32nd St City Anacortes State WA Zip Code 98221 FEC ID number of contributing federal political committee. C Name of Employer Alaska/Ocean Seafood Occupation Government Relations Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 06 / 12 / 2007 Transaction ID: SA110777-004 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Mr. John F. Bagley Mailing Address PO Box 19915 City Alexandria State VA Zip Code 22320 FEC ID number of contributing federal political committee. C Name of Employer Batelle Memorial Institute Occupation Vice-President Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA102828-011 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Gillian M Barlow Mailing Address 8006 Avalon Pl City Mercer Island State WA Zip Code 98040 FEC ID number of contributing federal political committee. C Name of Employer Not Employed Occupation Homemaker Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA177276-001 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		2000.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. James A Beall

Mailing Address 2111 SW Vista Ave

City State Zip Code
Portland OR 97201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ball Janick LLP

Occupation
Partner

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

237.00

Date of Receipt

06 / 26 / 2007

Transaction ID: SA177269-001

Amount of Each Receipt this Period

37.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. James A Beall

Mailing Address 2111 SW Vista Ave

City State Zip Code
Portland OR 97201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ball Janick LLP

Occupation
Partner

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

237.00

Date of Receipt

06 / 26 / 2007

Transaction ID: SA177269-002

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Mr. Howard G. Bedell

Mailing Address 1815 NW 100th St

City State Zip Code
Vancouver WA 98685

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Employed

Occupation
Retired

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

04 / 23 / 2007

Transaction ID: SA177164-002

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

487.00

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

27020400037

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Mr. David W. Benson Mailing Address 5303 Shilshole Ave NW City <u>Seattle</u> State <u>WA</u> Zip Code <u>98107</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt MM / DD / YYYY 06 / 12 / 2007 Transaction ID: SA119626-004 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Trident Seafoods Corp. Occupation Gov't Relations Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		
B. Full Name (Last, First, Middle Initial) Bobbie Berkowitz Mailing Address 1900 Alaskan Way Apt 312 City <u>Seattle</u> State <u>WA</u> Zip Code <u>98101</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA177282-001 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Information Requested Occupation Information Requested Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		
C. Full Name (Last, First, Middle Initial) Mr. Leonard Bickwit, Jr. Mailing Address 2821 Dumbarton St NW City <u>Washington</u> State <u>DC</u> Zip Code <u>20007</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA105337-004 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Miller & Chavalier Occupation Attorney Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		
SUBTOTAL of Receipts This Page (optional) ▶		1500.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Ms. Diana H. Birkett

Mailing Address 607 E Harrison St Apt 502

City

Seattle

State

WA

Zip Code

98102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Group Health Cooperative

Occupation

Director

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 26 / 2007

Transaction ID: SA173667-003

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Mr. Jabe Blumenthal

Mailing Address 1236 21st Ave E

City

Seattle

State

WA

Zip Code

98112

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation

Retired

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

MM / DD / YYYY
06 / 21 / 2007

Transaction ID: SA112032-005

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Van R Boyette

Mailing Address 1420 New York Ave NW Ste 800

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Smith & Boyette

Occupation

Attorney

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 26 / 2007

Transaction ID: SA177285-001

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Mr. Charles Bracht

Mailing Address 5314 Mandell St

City

Houston

State

TX

Zip Code

77005

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Apogee

Occupation
 Insurance

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

MM / DD / YYYY
 06 / 26 / 2007

Transaction ID: SA127630-003

Amount of Each Receipt this Period

325.00

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Mr. Herb Bridge

Mailing Address 2125 1st Ave Apt 1905

City

Seattle

State

WA

Zip Code

98121

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Not employed

Occupation
 Retired

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
 04 / 23 / 2007

Transaction ID: SA109821-018

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Mr. Keith A. Bruton

Mailing Address 210 N 201st St

City

Seattle

State

WA

Zip Code

98133

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Ohara Corp.

Occupation
 Manager

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
 06 / 21 / 2007

Transaction ID: SA119029-004

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1325.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Mr. Charles Bundrant

Mailing Address 5303 Shilshole Ave NW

City State Zip Code
Seattle WA 98107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Trident Seafoods Corp.

Occupation
Executive

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 12 / 2007

Transaction ID: SA104773-005

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Mr. Joseph Bundrant

Mailing Address 757 Main St

City State Zip Code
Edmonds WA 98020

FEC ID number of contributing
federal political committee.

C

Name of Employer
BSN Fisheries

Occupation
Owner

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 12 / 2007

Transaction ID: SA134120-003

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Mr. M. John Bundy

Mailing Address 2611 E Interlaken Blvd

City State Zip Code
Seattle WA 98112

FEC ID number of contributing
federal political committee.

C

Name of Employer
Glacier Fish Co.

Occupation
Executive

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 12 / 2007

Transaction ID: SA118779-006

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

1500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Mr. Jerry Campbell

Mailing Address 5614 12th Ave NE

City State Zip Code
Seattle WA 98105

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 26 / 2007

Transaction ID: SA162829-003

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Mr. Tom Campion

Mailing Address 14301 3rd Ave NW

City State Zip Code
Seattle WA 98177

FEC ID number of contributing
federal political committee.

C

Name of Employer
Zumiez Inc.

Occupation
CEO

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY
06 / 12 / 2007

Transaction ID: SA112034-018

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Brian M Cavey

Mailing Address 527 S Jefferson St

City State Zip Code
Arlington VA 22204

FEC ID number of contributing
federal political committee.

C

Name of Employer
Washington Group Internat-
ional

Occupation
Director of Govt Affairs

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
06 / 12 / 2007

Transaction ID: SA102631-002

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 15 / 102	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Doug L Christensen

Mailing Address 6523 NE My Way

City State Zip Code
Seattle WA 98110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Arctic Storm Inc

Occupation
President

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 12 / 2007

Transaction ID: SA106382-002

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Linda Church Ciocci

Mailing Address 2205 N Sycamore St

City State Zip Code
Arlington VA 22205

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nat'l Hydropower Assoc

Occupation
Exec Dir

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 26 / 2007

Transaction ID: SA177290-001

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Constance Cohn

Mailing Address PO Box 103

City State Zip Code
Edmonds WA 98020

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self employed

Occupation
Epidemiologist

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
06 / 07 / 2007

Transaction ID: SA107789-008

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

2000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 16 / 102	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Mr. Michael Coleman Mailing Address 2105 76th Ave SE City Mercer Island State WA Zip Code 98040 FEC ID number of contributing federal political committee. C Name of Employer Highland Light Foods Occupation Manager Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00		Date of Receipt MM / DD / YYYY 06 / 12 / 2007 Transaction ID: SA175889-002 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Mr. Barry D. Collier Mailing Address 819 Bell St City Edmonds State WA Zip Code 98020 FEC ID number of contributing federal political committee. C Name of Employer PeterPan Seafoods, Inc. Occupation President & CEO Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00		Date of Receipt MM / DD / YYYY 06 / 12 / 2007 Transaction ID: SA119616-002 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Victoria Cram Mailing Address 11000 Dobbins Dr City Potomac State MD Zip Code 20854 FEC ID number of contributing federal political committee. C Name of Employer Ball Janik LLP Occupation Attorney Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA177286-001 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number only)		

27020400044

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 17 / 102	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Maria

Full Name (Last, First, Middle Initial) A. Mr. Craig A. Cross		Date of Receipt MM / DD / YYYY 06 / 12 / 2007
Mailing Address 11021 1st Ave NW		Transaction ID: SA106940-006
City Seattle	State WA	Zip Code 98177
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Aleutian Spray Fisheries Inc.	Occupation Executive	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Dave Crumbo		Date of Receipt MM / DD / YYYY 06 / 12 / 2007
Mailing Address 2415 T Ave		Transaction ID: SA177231-001
City Anacortes	State WA	Zip Code 98221
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Alaska Ocean Seafood	Occupation CFO	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Thomas J. Curry		Date of Receipt MM / DD / YYYY 06 / 26 / 2007
Mailing Address 8105 N 12th St		Transaction ID: SA100978-003
City Tacoma	State WA	Zip Code 98406
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer WA St Medical Assn	Occupation Executive	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. James H. Davidson

Mailing Address 5009 39th St NW

City State Zip Code
Washington DC 20016

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Davidson-Colling Group

Occupation
Consultant

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
04 / 23 / 2007

Transaction ID: SA114989-002

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Mr. Aubrey Davis

Mailing Address 3804 Greenbrier Ln

City State Zip Code
Mercer Island WA 98040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Coastal Environmental Sys-
tems

Occupation
Chairman

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 26 / 2007

Transaction ID: SA104156-018

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. H. Joachim Deeg

Mailing Address 203 Euclid Ave

City State Zip Code
Seattle WA 98122

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fherc

Occupation
Research

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
04 / 26 / 2007

Transaction ID: SA118723-023

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Mr. Dan D. Dixon

Mailing Address 917 32nd Ave S

City

Seattle

State

WA

Zip Code

98144

FEC ID number of contributing
federal political committee.

C

Name of Employer
Swedish Hospital

Occupation
Attorney

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 21 / 2007

Transaction ID: SA108361-009

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Earmarked: conduit info
below

Full Name (Last, First, Middle Initial)

B. Above earmarked through Act Blue

Mailing Address P.O. Box 382110

City

Boston

State

MA

Zip Code

02238

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6877.00

Date of Receipt

MM / DD / YYYY
06 / 21 / 2007

Transaction ID: SAConduit108361-009

Amount of Each Receipt this Period

6877.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

(MEMO ITEM)
total from conduit

Full Name (Last, First, Middle Initial)

C. Len G. Eddinger

Mailing Address 8721 63rd Street Ct W

City

Tacoma

State

WA

Zip Code

98467

FEC ID number of contributing
federal political committee.

C

Name of Employer
WA St Medical Association

Occupation
Public Policy

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 26 / 2007

Transaction ID: SA100635-003

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 20 / 102	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full) Friends of Maria

Full Name (Last, First, Middle Initial) A. J Orin Edson		Date of Receipt MM / DD / YYYY 06 / 26 / 2007
Mailing Address PO Box 261		Transaction ID: SA177291-001
City Lakewood	State WA	Zip Code 98259
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Information Requested	Occupation Information Requested	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Mr. Robert Ellis		Date of Receipt MM / DD / YYYY 04 / 23 / 2007
Mailing Address 12209 McCormick Dr NW		Transaction ID: SA111898-004
City Gig Harbor	State WA	Zip Code 98332
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Not employed	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Nancy Ellison		Date of Receipt MM / DD / YYYY 06 / 26 / 2007
Mailing Address PO Box 82872		Transaction ID: SA119371-003
City Seattle	State WA	Zip Code 98028
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Regence Blue Shield	Occupation Dir. of Public Policy	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	1750.00
TOTAL This Period (last page this line number only)	

27020400048

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Mark D Emmerson

Mailing Address PO Box 496028

City

Redding

State

CA

Zip Code

96049

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sierra Pacific Industries

Occupation

CFO

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 26 / 2007

Transaction ID: SA177284-001

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Mr. Andrew Fields

Mailing Address 1520 16th St NW Apt 204

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mercey Strategies

Occupation

Government Relations

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
04 / 23 / 2007

Transaction ID: SA140159-002

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Shannon J Finley

Mailing Address 2909 Cleveland Ave NW

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Consultant

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
06 / 12 / 2007

Transaction ID: SA177228-001

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 102
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Dr. Mark F. Flanery Mailing Address 32721 111th PI SE City Auburn State WA Zip Code 98092 FEC ID number of contributing federal political committee. C Name of Employer Auburn Anesthesia Associates, Inc. PS Occupation Physician Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 250.00		Date of Receipt MM / DD / YYYY 06 / 21 / 2007 Transaction ID: SA110688-011 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Mr. John V. Fletcher Mailing Address 1420 Terry Ave Unit 1806 City Seattle State WA Zip Code 98101 FEC ID number of contributing federal political committee. C Name of Employer Providence Health & Services Occupation VP, CEO of WA & MT Region Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA177219-001 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Mr. John P. Freeman Mailing Address 2329 Wilmot Ave City Columbia State SC Zip Code 29205 FEC ID number of contributing federal political committee. C Name of Employer University of South Carolina Law School Occupation Professor Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 2000.00		Date of Receipt MM / DD / YYYY 06 / 08 / 2007 Transaction ID: SA116435-010 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		2750.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Mr. William A. Furman		Date of Receipt MM / DD / YYYY 06 / 26 / 2007
Mailing Address 1 Centerpointe Dr Ste 200		Transaction ID: SA175895-002
City Lake Oswego	State OR	Zip Code 97035
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
Name of Employer The Greenbrier Co.	Occupation CEO	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	
B. Full Name (Last, First, Middle Initial) Margaret A Gaston		Date of Receipt MM / DD / YYYY 04 / 23 / 2007
Mailing Address 1810 E Division St Apt 128		Transaction ID: SA108831-009
City Mount Vernon	State WA	Zip Code 98274
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Not employed	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	
C. Full Name (Last, First, Middle Initial) Mr. Julius Giamarco		Date of Receipt MM / DD / YYYY 06 / 12 / 2007
Mailing Address 101 W Big Beaver Rd Ste 1000		Transaction ID: SA172160-002
City Troy	State MI	Zip Code 48084
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Cox, Hodgeman & Giamarco	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		2750.00
TOTAL This Period (last page this line number only)		

27020400051

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 24 / 102	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Mr. James L. Gilmore Mailing Address 4914 Brookeway Dr City Bethesda State MD Zip Code 20816 FEC ID number of contributing federal political committee. C Name of Employer At-Sea Processors Association Occupation Director of Public Affairs Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00		Date of Receipt MM / DD / YYYY 06 / 12 / 2007 Transaction ID: SA108394-006 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Ms. Karen E. Glover Mailing Address 16202 Beach Dr NE City Seattle State WA Zip Code 98155 FEC ID number of contributing federal political committee. C Name of Employer Preston Gates & Ellis Occupation Attorney Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00		Date of Receipt MM / DD / YYYY 06 / 15 / 2007 Transaction ID: SA101218-012 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Mr Peter Goldman Mailing Address 4408 Beach Dr. SW City Seattle State WA Zip Code 98116 FEC ID number of contributing federal political committee. C Name of Employer Washington Forest Law Center Occupation Attorney Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 2000.00		Date of Receipt MM / DD / YYYY 06 / 12 / 2007 Transaction ID: SA100259-013 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		3000.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Andrew P Goldstein Mailing Address 9605 Culver St City Kensington State MD Zip Code 20895 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA177292-001 Amount of Each Receipt this Period 300.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer McCarthy Sweeney & Hardaway PC Occupation Attorney Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 300.00		
B. Full Name (Last, First, Middle Initial) Ms. Alison Gottfriedson Mailing Address 10915 Conine Ave SE City Olympia State WA Zip Code 98513 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 04 / 23 / 2007 Transaction ID: SA144952-005 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Alasek Inst. Occupation Consultant Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 1000.00		
C. Full Name (Last, First, Middle Initial) Mr. Leo Greenawalt Mailing Address 4423 E Sequim Bay Rd City Sequim State WA Zip Code 98382 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA106146-003 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Washington State Hospital Association Occupation Executive Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00		
SUBTOTAL of Receipts This Page (optional)		1800.00
TOTAL This Period (last page this line number only)		

27020400053

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A.

Full Name (Last, First, Middle Initial)

Mr. Lawrence C. Grossman

Mailing Address 1324 34th St NW

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Grossman Group

Occupation
Partner

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
04 / 23 / 2007

Transaction ID: SA101875-004

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mr. Jeremy M. Hales

Mailing Address 12507 Eagle Reach Ct

City

Pasco

State

WA

Zip Code

99301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self employed

Occupation
Scientist

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
06 / 12 / 2007

Transaction ID: SA137502-008

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Dr. Thomas N. Hansen

Mailing Address PO Box 809

City

Mercer Island

State

WA

Zip Code

98040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Seattle Children's Hospital

Occupation
President & CEO

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 26 / 2007

Transaction ID: SA177140-001

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 102
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Robert L Harris Mailing Address 601 Braxton Pl City Alexandria State VA Zip Code 22301 FEC ID number of contributing federal political committee. C Name of Employer Harris & Nutter Occupation Attorney Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00		Date of Receipt MM / DD / YYYY 04 / 23 / 2007 Transaction ID: SA177216-001 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) M Jonathan Hensley Mailing Address 14905 NE 167th St City Woodinville State WA Zip Code 98072 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Information Requested Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA177281-001 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Ms. Gloria Hern Mailing Address 7447 Sylmar Ave City Van Nuys State CA Zip Code 91405 FEC ID number of contributing federal political committee. C Name of Employer Not employed Occupation Retired Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 250.00		Date of Receipt MM / DD / YYYY 04 / 23 / 2007 Transaction ID: SA135815-004 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		1250.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 28 / 102	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Rodney Hochman Mailing Address 747 Broadway City Seattle State WA Zip Code 98122 FEC ID number of contributing federal political committee. C Name of Employer Swedish Hospital Occupation CEO Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA177277-001 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Mrs. Valerie Hood Mailing Address 2033 2nd Ave PH 1 City Seattle State WA Zip Code 98121 FEC ID number of contributing federal political committee. C Name of Employer Institute for Systems Bio-logy Occupation Volunteer Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt MM / DD / YYYY 05 / 03 / 2007 Transaction ID: SA103636-012 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Mrs. Valerie Hood Mailing Address 2033 2nd Ave PH 1 City Seattle State WA Zip Code 98121 FEC ID number of contributing federal political committee. C Name of Employer Institute for Systems Bio-logy Occupation Volunteer Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt MM / DD / YYYY 05 / 06 / 2007 Transaction ID: SA103636-011 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		3000.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 102
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Friends of Maria

Full Name (Last, First, Middle Initial) A. Michael Hyde		Date of Receipt MM / DD / YYYY 06 / 21 / 2007
Mailing Address 1712 Bigelow Ave N		Transaction ID: SA111869-005
City Seattle	State WA	Zip Code 98109
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer American Seafoods	Occupation President	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. L John Iani		Date of Receipt MM / DD / YYYY 06 / 12 / 2007
Mailing Address 8454 SE 47th Pl		Transaction ID: SA177230-001
City Mercer Island	State WA	Zip Code 98040
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Van Ness Feldman	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mr. Jonathan R. Jones		Date of Receipt MM / DD / YYYY 04 / 23 / 2007
Mailing Address 7936 Densmore Ave N		Transaction ID: SA104430-020
City Seattle	State WA	Zip Code 98103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Not employed	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input 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)	

27020400057

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Mr. Jonathan R. Jones Mailing Address 7936 Densmore Ave N City Seattle State WA Zip Code 98103 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 06 / 15 / 2007 Transaction ID: SA104430-021 Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Not employed Occupation Retired Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00		
B. Full Name (Last, First, Middle Initial) Mr. Henry A. Jordan Mailing Address 1465 Horseshoe Trl City Chester Springs State PA Zip Code 19425 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 05 / 03 / 2007 Transaction ID: SA124875-010 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Claneil Enterprises Inc. Occupation Foundation Executive Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		
C. Full Name (Last, First, Middle Initial) Dr Douglas M Kerr Mailing Address PO Box 1069 City Larkspur State CA Zip Code 94977 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA177287-001 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self employed Occupation Consultant Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		
SUBTOTAL of Receipts This Page (optional)		1600.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Ms. Sara Jo Kobacker

Mailing Address 17963 Lake Estates Dr.

City State Zip Code
Boca Raton FL 33496

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
04 / 26 / 2007

Transaction ID: SA172541-003

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. John Koster

Mailing Address 5016 102nd Ln NE

City State Zip Code
Kirkland WA 98033

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

MM / DD / YYYY
06 / 26 / 2007

Transaction ID: SA177278-001

Amount of Each Receipt this Period

750.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. William Krippaehne

Mailing Address 4870 NE 39th St

City State Zip Code
Seattle WA 98105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Employed

Occupation
Retired

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 26 / 2007

Transaction ID: SA156292-002

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

1750.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Mrs. Helen L. Lang Mailing Address 211 W Oak St Apt 1120 City State Zip Code Louisville KY 40203 FEC ID number of contributing federal political committee. C Name of Employer Not Employed Occupation Retired Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 04 / 23 / 2007 Transaction ID: SA146595-002 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Gordon Lindquist Mailing Address 22622 SE 20th St City State Zip Code Sammamish WA 98075 FEC ID number of contributing federal political committee. C Name of Employer Alaska General Seafoods Occupation General Manager Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 06 / 21 / 2007 Transaction ID: SA177265-001 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Richard E Magnuson Mailing Address 86 Wildwood Ct City State Zip Code Shelburne VT 05482 FEC ID number of contributing federal political committee. C Name of Employer Information Requested Occupation Information Requested Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA177280-001 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		1250.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Mr. Patrick J. McCann

Mailing Address 849 Centrillion Dr

City State Zip Code
Mc Lean VA 22102

FEC ID number of contributing
federal political committee.

C

Name of Employer
McCann Capitol Advocates

Occupation
President

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 26 / 2007

Transaction ID: SA177220-001

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Marla McClain

Mailing Address 5402 Tortuga Trl

City State Zip Code
Austin TX 78731

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self employed

Occupation
Information Requested

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
06 / 12 / 2007

Transaction ID: SA177226-001

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Mr. Donald G McGee

Mailing Address 8608 60th Ave W

City State Zip Code
Mukilteo WA 98275

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not employed

Occupation
Not employed

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
05 / 03 / 2007

Transaction ID: SA170686-004

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 102
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Mr. Roger D. McLennan

Mailing Address 1321 N Highlands Pkwy Apt 22

City State Zip Code
Tacoma WA 98406

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pierce County

Occupation
Judicial Assistant

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
05 / 03 / 2007

Transaction ID: SA103121-012

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Mr. Jack McRae

Mailing Address 107 Bell St Apt 101

City State Zip Code
Edmonds WA 98020

FEC ID number of contributing
federal political committee.

C

Name of Employer
Premera Blue Cross

Occupation
Senior Vice President

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
06 / 26 / 2007

Transaction ID: SA108505-009

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Ms. Karen Merrikin

Mailing Address 2521 9th Ave W

City State Zip Code
Seattle WA 98119

FEC ID number of contributing
federal political committee.

C

Name of Employer
Group Health

Occupation
Attorney

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
06 / 26 / 2007

Transaction ID: SA101231-005

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 35 / 102	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Mr. Patrick M. Murphy Mailing Address 203 3rd St NE City Washington State DC Zip Code 20002 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 04 / 23 / 2007 Transaction ID: SA114595-003 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Colling Murphy Swift Hynes Selfridge Occupation Partner Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		

B. Full Name (Last, First, Middle Initial) K E Gus Myers Mailing Address 424 Broadmoor St City Richland State WA Zip Code 99352 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 05 / 03 / 2007 Transaction ID: SA175157-002 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Babcock Services Occupation President Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		

C. Full Name (Last, First, Middle Initial) John A O'Donnell Mailing Address 1009 Constitution Ave NE City Washington State DC Zip Code 20002 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 06 / 12 / 2007 Transaction ID: SA177229-001 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Murray Sheer Montgomery Occupation Associate Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Brent C. Paine Mailing Address 666 W Bertona St City <u>Seattle</u> State <u>WA</u> Zip Code <u>98119</u> FEC ID number of contributing federal political committee. <u>C</u> Name of Employer <u>United Catcher Boats</u> Occupation <u>Executive Director</u> Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>▼</u> Election Cycle-to-Date <u>▼</u> <u>500.00</u>		Date of Receipt MM / DD / YYYY 06 / 12 / 2007 Transaction ID: SA100060-004 Amount of Each Receipt this Period <u>500.00</u> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Mr. Dennis J. Phelan Mailing Address 5849 Aspenwood Ct City <u>Mc Lean</u> State <u>VA</u> Zip Code <u>22101</u> FEC ID number of contributing federal political committee. <u>C</u> Name of Employer <u>Pacific Seafood Processors Association</u> Occupation <u>Vice President</u> Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>▼</u> Election Cycle-to-Date <u>▼</u> <u>1000.00</u>		Date of Receipt MM / DD / YYYY 06 / 12 / 2007 Transaction ID: SA101771-003 Amount of Each Receipt this Period <u>1000.00</u> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) John H Pierce Mailing Address 1010 E Lynn St City <u>Seattle</u> State <u>WA</u> Zip Code <u>98102</u> FEC ID number of contributing federal political committee. <u>C</u> Name of Employer <u>Information Requested</u> Occupation <u>Information Requested</u> Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <u>▼</u> Election Cycle-to-Date <u>▼</u> <u>750.00</u>		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA177279-001 Amount of Each Receipt this Period <u>750.00</u> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		<u>2250.00</u>
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Gaye Pigott Mailing Address 1405 42nd Ave E City <u>Seattle</u> State <u>WA</u> Zip Code <u>98112</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt MM / DD / YYYY <u>04</u> / <u>23</u> / <u>2007</u> Transaction ID: SA160344-004 Amount of Each Receipt this Period <u>1000.00</u> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Not employed Occupation Homemaker Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <u>2000.00</u>		
B. Full Name (Last, First, Middle Initial) Gaye Pigott Mailing Address 1405 42nd Ave E City <u>Seattle</u> State <u>WA</u> Zip Code <u>98112</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt MM / DD / YYYY <u>06</u> / <u>15</u> / <u>2007</u> Transaction ID: SA160344-005 Amount of Each Receipt this Period <u>1000.00</u> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Not employed Occupation Homemaker Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <u>2000.00</u>		
C. Full Name (Last, First, Middle Initial) Mr. Joseph Plesha Mailing Address 5010 NE 180th St City <u>Seattle</u> State <u>WA</u> Zip Code <u>98155</u> FEC ID number of contributing federal political committee. <u>C</u>		Date of Receipt MM / DD / YYYY <u>06</u> / <u>12</u> / <u>2007</u> Transaction ID: SA111672-004 Amount of Each Receipt this Period <u>500.00</u> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Trident Seafoods Occupation General Counsel Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <u>500.00</u>		
SUBTOTAL of Receipts This Page (optional)		<u>2500.00</u>
TOTAL This Period (last page this line number only)		

27020400065

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) John D Raffaelli Mailing Address 1401 K St NW Ste 1000 City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. C Name of Employer The Washington Group Occupation Principal Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 1000.00		Date of Receipt MM / DD / YYYY 04 / 23 / 2007 Transaction ID: SA108549-003 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Glenn Reed Mailing Address 7329 21st Ave NW City Seattle State WA Zip Code 98117 FEC ID number of contributing federal political committee. C Name of Employer PSPA Occupation President Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00		Date of Receipt MM / DD / YYYY 06 / 12 / 2007 Transaction ID: SA111866-002 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Ms. Irene L Ringwood Mailing Address 101 SW Main St Ste 1100 City Portland State OR Zip Code 97204 FEC ID number of contributing federal political committee. C Name of Employer Ball Janik LLP Occupation Attorney Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 237.00		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA101455-005 Amount of Each Receipt this Period 37.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		1537.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 102
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Ms. Irene L Ringwood

Mailing Address 101 SW Main St
Ste 1100

City State Zip Code
Portland OR 97204

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ball Janik LLP

Occupation
Attorney

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

237.00

Date of Receipt

06 / 26 / 2007

Transaction ID: SA101455-006

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Ms. Nancy Ritzenthaler

Mailing Address 1401 Sunset Ave SW

City State Zip Code
Seattle WA 98116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not employed

Occupation
Retired

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

06 / 12 / 2007

Transaction ID: SA106858-007

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Susan F. Robinson

Mailing Address 1322 NW Woodbine Way

City State Zip Code
Seattle WA 98177

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fisherman's Finest, Inc.

Occupation
Manager

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1150.00

Date of Receipt

06 / 26 / 2007

Transaction ID: SA119022-002

Amount of Each Receipt this Period

1150.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

2350.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 102
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial)
Mr Robert Schumann
Mailing Address PO Box 813
City Madison State CT Zip Code 06443
FEC ID number of contributing federal political committee. C
Name of Employer Not employed Occupation Retired
Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) Election Cycle-to-Date 500.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2007
Transaction ID: SA177267-001
Amount of Each Receipt this Period
500.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Terry E. Shaff
Mailing Address 12310 NE 109th Way
City Kirkland State WA Zip Code 98033
FEC ID number of contributing federal political committee. C
Name of Employer UniSea Occupation President & CEO
Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) Election Cycle-to-Date 500.00

Date of Receipt
MM / DD / YYYY
06 / 12 / 2007
Transaction ID: SA119629-002
Amount of Each Receipt this Period
500.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ms. Marcia Joslyn Sill
Mailing Address 1107 1st Ave Apt 1606
City Seattle State WA Zip Code 98101
FEC ID number of contributing federal political committee. C
Name of Employer Marcia Joslyn Sill, Llc Occupation Investment Advisor
Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) Election Cycle-to-Date 250.00

Date of Receipt
MM / DD / YYYY
04 / 23 / 2007
Transaction ID: SA105181-006
Amount of Each Receipt this Period
250.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

1250.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Mrs. Anne Simons

Mailing Address 98 Union St Apt 1000

City State Zip Code
Seattle WA 98101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not employed

Occupation
Retired

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
04 / 23 / 2007

Transaction ID: SA114890-008

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Mr. Michael A. Simpson

Mailing Address 10 Somerset Pl

City State Zip Code
Wilmington MA 01887

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mellon Financial Corporat-
ion

Occupation
Accounting Manager

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
04 / 23 / 2007

Transaction ID: SA123472-013

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Mr. Michael A. Simpson

Mailing Address 10 Somerset Pl

City State Zip Code
Wilmington MA 01887

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mellon Financial Corporat-
ion

Occupation
Accounting Manager

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
06 / 13 / 2007

Transaction ID: SA123472-014

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

27020400069

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Thomas Simpson

Mailing Address 4621 26th St N

City

Arlington

State

VA

Zip Code

22207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Railway Supply Institute

Occupation
Executive

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

06 / 26 / 2007

Transaction ID: SA177289-001

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. William Singer

Mailing Address 200 E Randolph St Fl 59

City

Chicago

State

IL

Zip Code

60601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kirkland & Ellis

Occupation
Attorney

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

04 / 11 / 2007

Transaction ID: SA100211-003

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Mr. Michael D Smith

Mailing Address 3421 Morrison St NW

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greenberg Traurig, LLC

Occupation
Attorney

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

06 / 12 / 2007

Transaction ID: SA104320-004

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 102

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Joseph C Stanko, Jr

Mailing Address 1900 K St NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing
federal political committee.

C

Name of Employer
Huntton & Williams

Occupation
Partner

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
04 / 23 / 2007

Transaction ID: SA177213-001

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Hugh Straley

Mailing Address 2230 33rd Ave S

City

Seattle

State

WA

Zip Code

98144

FEC ID number of contributing
federal political committee.

C

Name of Employer
Group Health Permanente

Occupation
Physician

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 26 / 2007

Transaction ID: SA169754-002

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Mr. Daniel M Streissguth

Mailing Address 900 E Blaine St

City

Seattle

State

WA

Zip Code

98102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not employed

Occupation
Retired

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
05 / 03 / 2007

Transaction ID: SA137728-004

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 44 / 102	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Ms. Suzanne Sullivan Mailing Address 801 Pennsylvania Ave NW Apt 12 City Washington State DC Zip Code 20004 FEC ID number of contributing federal political committee. C Name of Employer MCA Occupation Principal Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA124726-002 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Gregory P Swint Mailing Address 17040 26th Ave NE City Seattle State WA Zip Code 98155 FEC ID number of contributing federal political committee. C Name of Employer Group Health Occupation Vp Sales & Marketing Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA173677-002 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Joan K. Thomas Mailing Address 5040 16th Ave NE City Seattle State WA Zip Code 98105 FEC ID number of contributing federal political committee. C Name of Employer Not employed Occupation Retired Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 03 / 2007 Transaction ID: SA103908-014 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 102
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Ms. Anna May Timmons

Mailing Address 1150 SW Chapman Way Apt 305

City State Zip Code
Palm City FL 34990

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not employed

Occupation
Retired

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
06 / 05 / 2007

Transaction ID: SA100415-008

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Mr. Mark Torrance

Mailing Address 2013 4th Ave Ste 402S

City State Zip Code
Seattle WA 98121

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Private Investor

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
06 / 12 / 2007

Transaction ID: SA111870-016

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Mr. Jim Turner

Mailing Address 6607 114th Ave SE

City State Zip Code
Bellevue WA 98006

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not employed

Occupation
Retired

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY
04 / 20 / 2007

Transaction ID: SA114269-027

Amount of Each Receipt this Period

30.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1280.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 46 / 102	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A.

Full Name (Last, First, Middle Initial)

Mr. Jim Turner

Mailing Address 6607 114th Ave SE

City

Bellevue

State

WA

Zip Code

98006

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not employed

Occupation

Retired

Receipt For: 2012

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

05 / 06 / 2007

Transaction ID: SA114269-026

Amount of Each Receipt this Period

30.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Mr. Jim Turner

Mailing Address 6607 114th Ave SE

City

Bellevue

State

WA

Zip Code

98006

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not employed

Occupation

Retired

Receipt For: 2012

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

05 / 09 / 2007

Transaction ID: SA114269-025

Amount of Each Receipt this Period

30.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Kristian Uri

Mailing Address 4420 147th Pl SW

City

Lynnwood

State

WA

Zip Code

98087

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fisherman's Finest

Occupation

Manager

Receipt For: 2012

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1150.00

Date of Receipt

06 / 26 / 2007

Transaction ID: SA112261-002

Amount of Each Receipt this Period

1150.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1210.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 102
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Ms. Daphne Weaver Mailing Address 880 S Ocean Blvd City Lake Worth State FL Zip Code 33462 FEC ID number of contributing federal political committee. C Name of Employer Not Employed Occupation Homemaker Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 2500.00		Date of Receipt MM / DD / YYYY 04 / 11 / 2007 Transaction ID: SA142441-001 Amount of Each Receipt this Period 2500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Mr. Joshua C. Whetzel, Jr. Mailing Address 5036 Castleman St City Pittsburgh State PA Zip Code 15232 FEC ID number of contributing federal political committee. C Name of Employer Not employed Occupation Retired Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00		Date of Receipt MM / DD / YYYY 06 / 15 / 2007 Transaction ID: SA120792-011 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Mr. Keith Whittemore Mailing Address 201 Lake Washington Blvd City Seattle State WA Zip Code 98122 FEC ID number of contributing federal political committee. C Name of Employer Kuichak Marine Ind Occupation Boat Builder Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00		Date of Receipt MM / DD / YYYY 04 / 11 / 2007 Transaction ID: SA139078-003 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		3500.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 48 / 102	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) Wayne W Williams Mailing Address 7025 28th Ave NW City Tulalip State WA Zip Code 98271 FEC ID number of contributing federal political committee. C Name of Employer Not employed Occupation Retired Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 05 / 03 / 2007 Transaction ID: SA104999-011 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Mr. Rick D Woods Mailing Address 745A Harvard Ave E City Seattle State WA Zip Code 98102 FEC ID number of contributing federal political committee. C Name of Employer Group Health Cooperative Occupation Attorney Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA173679-002 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Alan R Yordy Mailing Address PO Box 6876 City Bellevue State WA Zip Code 98008 FEC ID number of contributing federal political committee. C Name of Employer PeaceHealth Occupation President Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 06 / 26 / 2007 Transaction ID: SA177283-001 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		1250.00
TOTAL This Period (last page this line number only) ▶		76239.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 102
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial) ADP Mailing Address 5000 148th Ave NE City Redmond State WA Zip Code 98052 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1438.50		Date of Receipt MM / DD / YYYY 05 / 01 / 2007 Transaction ID: SA113111-006 Amount of Each Receipt this Period 220.73 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Tax Refund
B. Full Name (Last, First, Middle Initial) GMMB Mailing Address PO Box 7777 City Philadelphia State PA Zip Code 19175 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 53365.36		Date of Receipt MM / DD / YYYY 05 / 08 / 2007 Transaction ID: SA171052-003 Amount of Each Receipt this Period 25568.01 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Media Refund
C. Full Name (Last, First, Middle Initial) Mr. Michael P. Meehan Mailing Address 33 Rosecrest Ave City Alexandria State VA Zip Code 22301 FEC ID number of contributing federal political committee. C Name of Employer Senator Maria Cantwell Occupation Chief of Staff Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ .00		Date of Receipt MM / DD / YYYY 06 / 30 / 2007 Transaction ID: SA102213-002 Amount of Each Receipt this Period 411.20 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Billed In Error
SUBTOTAL of Receipts This Page (optional)		26199.94
TOTAL This Period (last page this line number only)		26199.94

**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 50 / 102

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 00001

City Los Angeles State CA Zip Code 92001

Purpose of Disbursement
Credit Card Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB119842-068

Date of Disbursement

04 / 02 / 2007

Amount of Each Disbursement this Period

4.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 00001

City Los Angeles State CA Zip Code 92001

Purpose of Disbursement
Credit Card Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB119842-069

Date of Disbursement

04 / 05 / 2007

Amount of Each Disbursement this Period

22.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 00001

City Los Angeles State CA Zip Code 92001

Purpose of Disbursement
Credit Card Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB119842-070

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

4.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

31.20

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 51 / 102

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Maria

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

American Express

Mailing Address PO Box 00001

City Los Angeles State CA Zip Code 92001

Purpose of Disbursement

Credit Card Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB119842-071

Date of Disbursement

05 / 07 / 2007

Amount of Each Disbursement this Period

28.70

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

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

American Express

Mailing Address PO Box 00001

City Los Angeles State CA Zip Code 92001

Purpose of Disbursement

Credit Card Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB119842-072

Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

4.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

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

American Express

Mailing Address PO Box 00001

City Los Angeles State CA Zip Code 92001

Purpose of Disbursement

Credit Card Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB119842-073

Date of Disbursement

06 / 05 / 2007

Amount of Each Disbursement this Period

26.24

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

59.44

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 52 / 102

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Friends of Maria

A. Full Name (Last, First, Middle Initial)
Auburn Quad, Inc.

Mailing Address P.O. Box 390728

City State Zip Code
Cambridge MA 02139

Purpose of Disbursement

Credit card fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB148673-036

Date of Disbursement

06 / 24 / 2007

Amount of Each Disbursement this Period

19.75

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Authorize.net

Mailing Address 915 South 500 East Ste 200

City State Zip Code
American Fork UT 84003

Purpose of Disbursement

Credit card fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB164376-014

Date of Disbursement

04 / 03 / 2007

Amount of Each Disbursement this Period

37.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

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

Mailing Address 915 South 500 East Ste 200

City State Zip Code
American Fork UT 84003

Purpose of Disbursement

Credit card fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB164376-015

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

26.70

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

83.65

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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address 915 South 500 East Ste 200

City
American Fork

State
UT

Zip Code
84003

Purpose of Disbursement
Credit card fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB164376-016

Date of Disbursement

06 / 04 / 2007

Amount of Each Disbursement this Period

21.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address PO Box 1232

City
Charlotte

State
NC

Zip Code
28201

Purpose of Disbursement
Bank charge

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113426-201

Date of Disbursement

04 / 02 / 2007

Amount of Each Disbursement this Period

44.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address PO Box 1232

City
Charlotte

State
NC

Zip Code
28201

Purpose of Disbursement
Bank charge

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113426-202

Date of Disbursement

04 / 12 / 2007

Amount of Each Disbursement this Period

207.37

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

273.52

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

27020400081

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address PO Box 1232

City Charlotte State NC Zip Code 28201

Purpose of Disbursement
Bank charge

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113426-203
Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

44.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address PO Box 1232

City Charlotte State NC Zip Code 28201

Purpose of Disbursement
Bank charge

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113426-204
Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

44.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address PO Box 1232

City Charlotte State NC Zip Code 28201

Purpose of Disbursement
Bank charge

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113426-205
Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

15.47

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

105.37

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address PO Box 1232

City Charlotte State NC Zip Code 28201

Purpose of Disbursement

Bank charge

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113426-206

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

111.11

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address PO Box 1232

City Charlotte State NC Zip Code 28201

Purpose of Disbursement

Bank charge

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113426-207

Date of Disbursement

04 / 02 / 2007

Amount of Each Disbursement this Period

35.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address PO Box 1232

City Charlotte State NC Zip Code 28201

Purpose of Disbursement

Bank charge

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113426-208

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

35.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

181.11

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

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

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for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address PO Box 1232

City Charlotte State NC Zip Code 28201

Purpose of Disbursement

Bank charge

Candidate Name

001

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113426-209

Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

35.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Beth Foster Consultants

Mailing Address 2102 W 49th St.

City Minneapolis State MN Zip Code 55409

Purpose of Disbursement

Consulting/Fundraising

Candidate Name

001

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113498-041

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

3000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Beth Foster Consultants

Mailing Address 2102 W 49th St.

City Minneapolis State MN Zip Code 55409

Purpose of Disbursement

Consulting/Fundraising

Candidate Name

001

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113498-042

Date of Disbursement

05 / 28 / 2007

Amount of Each Disbursement this Period

3000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

6035.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Beth Foster Consultants

Mailing Address 2102 W 49th St.

City Minneapolis State MN Zip Code 55409

Purpose of Disbursement
Consulting/Fundraising

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113498-043

Date of Disbursement

06 / 27 / 2007

Amount of Each Disbursement this Period

3000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Big Sky Copywriting

Mailing Address 6710 Linda Vista Blvd

City Missoula State MT Zip Code 59803

Purpose of Disbursement
Printing

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113282-031

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Big Sky Copywriting

Mailing Address 6710 Linda Vista Blvd

City Missoula State MT Zip Code 59803

Purpose of Disbursement
Printing

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113282-032

Date of Disbursement

05 / 19 / 2007

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

5500.00

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

27020400085

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

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. C. Baker Johnson

Mailing Address 19043 Blue Ridge Mountain Road

City State Zip Code
Bluemont VA 20135

Purpose of Disbursement
Printing

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB171088-003

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

275.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. C. Baker Johnson

Mailing Address 19043 Blue Ridge Mountain Road

City State Zip Code
Bluemont VA 20135

Purpose of Disbursement
Printing

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB171088-004

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

175.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Caley & Associates

Mailing Address PO Box 1388

City State Zip Code
Vancouver WA 98666

Purpose of Disbursement
Accounting

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB112957-082

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

3898.77

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

4348.77

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. CHS Mailing

Mailing Address 12006 Old Baltimore Pike

City State Zip Code
Beltsville MD 20705

Purpose of Disbursement
Mailing Service

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113280-027

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

11157.76

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. CS Data Managers, LLC

Mailing Address PO Box 364

City State Zip Code
Rolla MO 65402

Purpose of Disbursement
Data management services

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB124492-017

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

45.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. CS Data Managers, LLC

Mailing Address PO Box 364

City State Zip Code
Rolla MO 65402

Purpose of Disbursement
Data management services

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB124492-018

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

710.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

11912.76

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

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

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Cybersource

Mailing Address 4501 Intelco Loop SE

City Olympia State WA Zip Code 98507

Purpose of Disbursement

Credit Card Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB135090-069

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

49.06

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Cybersource

Mailing Address 4501 Intelco Loop SE

City Olympia State WA Zip Code 98507

Purpose of Disbursement

Credit Card Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB135090-070

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

47.17

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Cybersource

Mailing Address 4501 Intelco Loop SE

City Olympia State WA Zip Code 98507

Purpose of Disbursement

Credit Card Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB135090-071

Date of Disbursement

04 / 03 / 2007

Amount of Each Disbursement this Period

87.10

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

183.33

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
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20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Cybersource

Mailing Address 4501 Intelco Loop SE

City Olympia State WA Zip Code 98507

Purpose of Disbursement
Credit Card Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB135090-072

Date of Disbursement

04 / 27 / 2007

Amount of Each Disbursement this Period

5.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Cybersource

Mailing Address 4501 Intelco Loop SE

City Olympia State WA Zip Code 98507

Purpose of Disbursement
Credit Card Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB135090-073

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

83.59

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Cybersource

Mailing Address 4501 Intelco Loop SE

City Olympia State WA Zip Code 98507

Purpose of Disbursement
Credit Card Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB135090-074

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

113.59

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
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Cybersource

Mailing Address 4501 Intelco Loop SE

City Olympia State WA Zip Code 98507

Purpose of Disbursement
Credit Card Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB135090-075

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Cybersource

Mailing Address 4501 Intelco Loop SE

City Olympia State WA Zip Code 98507

Purpose of Disbursement
Credit Card Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB135090-076

Date of Disbursement

05 / 04 / 2007

Amount of Each Disbursement this Period

50.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Cybersource

Mailing Address 4501 Intelco Loop SE

City Olympia State WA Zip Code 98507

Purpose of Disbursement
Credit Card Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB135090-077

Date of Disbursement

06 / 04 / 2007

Amount of Each Disbursement this Period

151.62

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

226.62

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
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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Cybersource

Mailing Address 4501 Intelco Loop SE

City
Olympia

State
WA

Zip Code
98507

Purpose of Disbursement
Credit Card Fees

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB135090-078

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

96.03

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Department Of Employment Services

Mailing Address PO Box 96664

City
Washington

State
DC

Zip Code
20090

Purpose of Disbursement
Employment Taxes

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB177299-001

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

400.41

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Federal Express

Mailing Address PO Box 1140

City
Memphis

State
TN

Zip Code
38101

Purpose of Disbursement
Shipping

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB113138-140

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

26.58

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

523.02

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

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(check only one)

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NAME OF COMMITTEE (In Full)

Friends of Maria

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

Mailing Address PO Box 1140

City Memphis State TN Zip Code 38101

Purpose of Disbursement
Shipping

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113138-141

Date of Disbursement

05 / 19 / 2007

Amount of Each Disbursement this Period

28.77

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Golden Eagle

Mailing Address 132 West 31st Street
14th Floor

City New York State NY Zip Code 10001

Purpose of Disbursement
Credit Card Fee

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB155477-024

Date of Disbursement

04 / 16 / 2007

Amount of Each Disbursement this Period

46.03

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

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

Mailing Address 132 West 31st Street
14th Floor

City New York State NY Zip Code 10001

Purpose of Disbursement
Credit Card Fee

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB155477-025

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

46.03

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

120.83

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Golden Eagle Full Name (Last, First, Middle Initial) Mailing Address 132 West 31st Street 14th Floor City New York State NY Zip Code 10001 Purpose of Disbursement Credit Card Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: SB155477-026 Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2007 Amount of Each Disbursement this Period 46.03 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B. Intuit Software Full Name (Last, First, Middle Initial) Mailing Address 2632 Marine Way, MS2700 City Mountain View State CA Zip Code 94039 Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: SB124499-007 Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2007 Amount of Each Disbursement this Period 87.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C. Linemark Printing Full Name (Last, First, Middle Initial) Mailing Address 1220 Caraway Ct. #1040 City Largo State MD Zip Code 20774 Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: SB124503-038 Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2007 Amount of Each Disbursement this Period 4541.68 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
SUBTOTAL of Disbursements This Page (optional)		4675.22
TOTAL This Period (last page this line number only)		

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

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

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Linemark Printing

Mailing Address 1220 Caraway Ct. #1040

City State Zip Code
Largo MD 20774

Purpose of Disbursement
Printing

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB124503-039

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2007

Amount of Each Disbursement this Period

6036.45

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Mayfield Strategy Group

Mailing Address 724 Lytton Ave.

City State Zip Code
Palo Alto CA 94301

Purpose of Disbursement
consulting/technology

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB120707-028

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2007

Amount of Each Disbursement this Period

3000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Mayfield Strategy Group

Mailing Address 724 Lytton Ave.

City State Zip Code
Palo Alto CA 94301

Purpose of Disbursement
consulting/technology

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB120707-029

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2007

Amount of Each Disbursement this Period

4425.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

13461.45

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
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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Mr. Michael P. Meehan

Mailing Address 33 Rosecrest Ave

City Alexandria State VA Zip Code 22301

Purpose of Disbursement
Travel Reimbursement

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB102213-036

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

4372.89

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Alaska Airlines

Mailing Address 16601 Air Cargo Rd

City Seatac State WA Zip Code 98158

Purpose of Disbursement
Airfare

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB102213-036.1

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

400.80

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. L'Ecole

Mailing Address PO Box 111

City Touchet State WA Zip Code 99360

Purpose of Disbursement
Catering

Candidate Name

007
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB102213-036.2

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

868.11

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

4372.89

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

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Marcus Whitman Hotel

Mailing Address 6 West Rose Street

City Walla Walla State WA Zip Code 99362

Purpose of Disbursement
Lodging

Candidate Name

002
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB102213-036.3

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

808.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Pepper Bridge Winery

Mailing Address 1704 J.B. George Road

City Walla Walla State WA Zip Code 99362

Purpose of Disbursement
Catering

Candidate Name

002
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB102213-036.4

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

282.45

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Porter's

Mailing Address 1207 19th Street, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Catering

Candidate Name

002
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB102213-036.5

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

-1804.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMOBilled In Error

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial)
Schneider's of Capitol Hill

Mailing Address 300 Massachusetts Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Catering

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB102213-036.6

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

406.33

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Schneider's of Capitol Hill

Mailing Address 300 Massachusetts Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Catering

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB102213-036.7

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

-921.17

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMOBilled In Error

C. Full Name (Last, First, Middle Initial)
Senate Gift Shop

Mailing Address Dirksen Senate Office Building

City Washington State DC Zip Code 20510

Purpose of Disbursement
Office Supplies

Candidate Name

006

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB102213-036.8

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Friends of Maria

A. Full Name (Last, First, Middle Initial)
Staples

Mailing Address 1541 15th Ave W

City State Zip Code
Seattle WA 98119

Purpose of Disbursement
Office Supplies
Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼
 State: District:

Transaction ID: SB102213-036.9
Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period
47.23

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
US Senate Resaurants

Mailing Address 1st & C St, NE

City State Zip Code
Washington DC 20510

Purpose of Disbursement
Meals
Candidate Name

002
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼
 State: District:

Transaction ID: SB102213-036.10
Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period
237.40

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address PO Box 790293

City State Zip Code
Saint Louis MO 63179

Purpose of Disbursement
Technology Expense
Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼
 State: District:

Transaction ID: SB102213-036.11
Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period
856.63

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Friends of Maria

Full Name (Last, First, Middle Initial)

A. W Hotels

Mailing Address 1112 4th Avenue

City State Zip Code
Seattle WA 98101

Purpose of Disbursement
Lodging

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB102213-036.12

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

1231.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Mr. Michael P. Meehan

Mailing Address 33 Rosecrest Ave

City State Zip Code
Alexandria VA 22301

Purpose of Disbursement
Consulting/Communications

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB102213-037

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

3000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Merchant Solutions

Mailing Address 920 N. Argonne Rd.
Suite 200

City State Zip Code
Opportunity Area WA 99212

Purpose of Disbursement
Bank Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB161500-017

Date of Disbursement

04 / 02 / 2007

Amount of Each Disbursement this Period

35.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

3035.00

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

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(check only one)

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Names in the News

Mailing Address 1300 Clay St
FI 11

City Oakland State CA Zip Code 94612

Purpose of Disbursement
List Expense

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113279-028

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

166.85

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Names in the News

Mailing Address 1300 Clay St
FI 11

City Oakland State CA Zip Code 94612

Purpose of Disbursement
List Expense

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113279-029

Date of Disbursement

05 / 19 / 2007

Amount of Each Disbursement this Period

289.68

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Names in the News

Mailing Address 1300 Clay St
FI 11

City Oakland State CA Zip Code 94612

Purpose of Disbursement
List Expense

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113279-030

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

206.85

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

663.38

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

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(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Perkins Coie, LLP

Mailing Address 1201 3rd Ave
Fl 40

City State Zip Code
Seattle WA 98101

Purpose of Disbursement
Legal Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113382-023

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

62.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Perkins Coie, LLP

Mailing Address 1201 3rd Ave
Fl 40

City State Zip Code
Seattle WA 98101

Purpose of Disbursement
Legal Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113382-024

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

296.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Mr. Steven J. Petterson

Mailing Address 1415 Chapin Street, NW
Unit #2

City State Zip Code
Washington DC 20009

Purpose of Disbursement
Consulting/Compliance

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB148666-027

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

3000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

3358.00

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:
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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Mr. Steven J. Petterson

Transaction ID: SB148666-028

Date of Disbursement

MM / DD / YYYY
05 / 28 / 2007

Mailing Address 1415 Chapin Street, NW
Unit #2

City Washington State DC Zip Code 20009

Purpose of Disbursement
Consulting/Compliance

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

3000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Mr. Steven J. Petterson

Transaction ID: SB148666-029

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2007

Mailing Address 1415 Chapin Street, NW
Unit #2

City Washington State DC Zip Code 20009

Purpose of Disbursement
Consulting/Compliance

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

3000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Ryan Phillips Utrecht & Mackinnon

Transaction ID: SB113267-023

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2007

Mailing Address 1133 Connecticut Ave NW
Ste 300

City Washington State DC Zip Code 20036

Purpose of Disbursement
Legal Fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

167.89

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

6167.89

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

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Ms. Melissa Schwartz

Mailing Address 119 19th Avenue E, #204

City State Zip Code
Seattle WA 98112

Purpose of Disbursement
Consulting/Fundraising

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB119863-045

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

4500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Ms. Melissa Schwartz

Mailing Address 119 19th Avenue E, #204

City State Zip Code
Seattle WA 98112

Purpose of Disbursement
Consulting/Fundraising

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB119863-046

Date of Disbursement

05 / 28 / 2007

Amount of Each Disbursement this Period

4500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Ms. Melissa Schwartz

Mailing Address 119 19th Avenue E, #204

City State Zip Code
Seattle WA 98112

Purpose of Disbursement
Consulting/Fundraising

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB119863-047

Date of Disbursement

06 / 27 / 2007

Amount of Each Disbursement this Period

4500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

13500.00

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

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Mr. Brian Srenar

Mailing Address 3426 16th St. NW #306

City
Washington

State
DC

Zip Code
20010

Purpose of Disbursement
Travel Reimbursement

Candidate Name

007

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB124487-027

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

111.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Mr. Brian Srenar

Mailing Address 3426 16th St. NW #306

City
Washington

State
DC

Zip Code
20010

Purpose of Disbursement
Catering

Candidate Name

002

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB124487-028

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

1306.80

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Starbucks Coffee Company

Mailing Address 2401 Utah Ave S

City
Seattle

State
WA

Zip Code
98134

Purpose of Disbursement
Catering

Candidate Name

007

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB112962-030

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

982.05

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2400.35

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Stockton Inc.

Mailing Address 7940 Cessna Ave

City
Gaithersburg

State
MD

Zip Code
20879

Purpose of Disbursement
Mailing Services

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB113281-027

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. The Funding Partners, LLC

Mailing Address 3426 16th St. NW #306

City
Washington

State
DC

Zip Code
20010

Purpose of Disbursement
Consulting/Fundraising

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB124515-041

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

4500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. The Funding Partners, LLC

Mailing Address 3426 16th St. NW #306

City
Washington

State
DC

Zip Code
20010

Purpose of Disbursement
Consulting/Fundraising

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB124515-042

Date of Disbursement

05 / 28 / 2007

Amount of Each Disbursement this Period

4500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

11000.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. The Funding Partners, LLC

Mailing Address 3426 16th St. NW #306

City Washington State DC Zip Code 20010

Purpose of Disbursement
Consulting/Fundraising

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB124515-043

Date of Disbursement

06 / 27 / 2007

Amount of Each Disbursement this Period

4500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Triplex Direct Marketing Corp.

Mailing Address PO Box 1800

City Novato State CA Zip Code 94949

Purpose of Disbursement
Printing

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113503-024

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

374.06

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Triplex Direct Marketing Corp.

Mailing Address PO Box 1800

City Novato State CA Zip Code 94949

Purpose of Disbursement
Printing

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113503-025

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

65.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

4939.06

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
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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Triplex Direct Marketing Corp.

Mailing Address PO Box 1800

City Novato State CA Zip Code 94949

Purpose of Disbursement
Printing

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113503-026

Date of Disbursement

05 / 19 / 2007

Amount of Each Disbursement this Period

106.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Triplex Direct Marketing Corp.

Mailing Address PO Box 1800

City Novato State CA Zip Code 94949

Purpose of Disbursement
Printing

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113503-027

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

350.52

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Upwards Technologies

Mailing Address 704 N 64th St

City Seattle State WA Zip Code 98103

Purpose of Disbursement
Computer Services

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB124519-031

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

556.52

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

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

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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Upwards Technologies

Mailing Address 704 N 64th St

City
Seattle

State
WA

Zip Code
98103

Purpose of Disbursement
Computer Services

Candidate Name

001
Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB124519-032

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

50.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. US Bank

Mailing Address 10800 NE 8th St

City
Bellevue

State
WA

Zip Code
98004

Purpose of Disbursement
Bank Charge

Candidate Name

001
Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB113305-550

Date of Disbursement

04 / 13 / 2007

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. US Bank

Mailing Address 10800 NE 8th St

City
Bellevue

State
WA

Zip Code
98004

Purpose of Disbursement
Bank Charge

Candidate Name

001
Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB113305-551

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

8.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

83.00

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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. US Bank

Mailing Address 10800 NE 8th St

City Bellevue State WA Zip Code 98004

Purpose of Disbursement

Bank Charge

Candidate Name

001

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2012

☒ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Transaction ID: SB113305-552

Date of Disbursement

06 / 14 / 2007

Amount of Each Disbursement this Period

42.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. US Bank

Mailing Address 10800 NE 8th St

City Bellevue State WA Zip Code 98004

Purpose of Disbursement

Credit card payment

Candidate Name

001

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2012

☒ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Transaction ID: SB113305-553

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

173.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Amtrak

Mailing Address 60 Massachusetts Avenue NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2012

☒ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Transaction ID: SB113305-553.1

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

173.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

215.00

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:
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☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial)
US Bank

Mailing Address 10800 NE 8th St

City Bellevue State WA Zip Code 98004

Purpose of Disbursement
Credit card payment

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-554
Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

1701.81

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Cash Vault

Mailing Address 800 Nicollet Mall

City Minneapolis State MN Zip Code 55402

Purpose of Disbursement
Catering

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-554.1
Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

257.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address PO Box 60017

City Los Angeles State CA Zip Code 90060

Purpose of Disbursement
Technology Expense

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-554.2
Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

186.56

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

1701.81

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

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

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

FOR LINE NUMBER:
(check only one)

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20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Cingular Wireless

Mailing Address PO Box 60017

City Los Angeles State CA Zip Code 90060

Purpose of Disbursement
Technology Expense

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-554.3

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

559.67

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Public Storage

Mailing Address Lake Union
Fairview Avenue N

City Seattle State WA Zip Code 98109

Purpose of Disbursement
Storage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-554.4

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

369.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Tivo

Mailing Address 2160 Gold Street

City Alviso State CA Zip Code 95002

Purpose of Disbursement
Technology Expense

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-554.5

Date of Disbursement

04 / 18 / 2007

Amount of Each Disbursement this Period

6.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
Friends of Maria

A. Tivo Full Name (Last, First, Middle Initial) Mailing Address 2160 Gold Street City Alviso State CA Zip Code 95002 Purpose of Disbursement Technology Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB113305-554.6 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7 Amount of Each Disbursement this Period 99.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
B. Tivo Full Name (Last, First, Middle Initial) Mailing Address 2160 Gold Street City Alviso State CA Zip Code 95002 Purpose of Disbursement Technology Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB113305-554.7 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7 Amount of Each Disbursement this Period 39.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
C. UPS Full Name (Last, First, Middle Initial) Mailing Address 55 Glenlake Parkway, NE City Atlanta State GA Zip Code 30328 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB113305-554.8 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7 Amount of Each Disbursement this Period 106.08 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional) ▶		0.00
TOTAL This Period (last page this line number only) ▶		

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

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. UPS

Full Name (Last, First, Middle Initial)

Transaction ID: SB113305-554.9

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2007

Mailing Address 55 Glenlake Parkway, NE

Amount of Each Disbursement this Period

14.03

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
Shipping

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

B. UPS

Full Name (Last, First, Middle Initial)

Transaction ID: SB113305-554.10

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2007

Mailing Address 55 Glenlake Parkway, NE

Amount of Each Disbursement this Period

14.97

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
Shipping

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

C. US Bank

Full Name (Last, First, Middle Initial)

Transaction ID: SB113305-555

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2007

Mailing Address 10800 NE 8th St

Amount of Each Disbursement this Period

2224.94

City Bellevue State WA Zip Code 98004

Purpose of Disbursement
Credit card payment

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2224.94

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)

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NAME OF COMMITTEE (In Full)
Friends of Maria

Full Name (Last, First, Middle Initial)
A. Alaska Airlines

Mailing Address 16601 Air Cargo Rd

City Seatac State WA Zip Code 98158

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-555.1
Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

284.80

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 60 Massachusetts Avenue NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-555.2
Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

157.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. Dav El Reservations

Mailing Address 200 2nd Street

City Chelsea State MA Zip Code 02150

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-555.3
Date of Disbursement

04 / 03 / 2007

Amount of Each Disbursement this Period

588.90

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial)
Dav El Reservations

Mailing Address 200 2nd Street

City Chelsea State MA Zip Code 02150

Purpose of Disbursement
Travel

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

002
Category/
Type

Transaction ID: SB113305-555.4
Date of Disbursement

04 / 04 / 2007

Amount of Each Disbursement this Period

161.04

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Lowes Hotels

Mailing Address 540 Park Avenue

City New York State NY Zip Code 10021

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

002
Category/
Type

Transaction ID: SB113305-555.5
Date of Disbursement

04 / 03 / 2007

Amount of Each Disbursement this Period

14.63

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 540 Park Avenue

City New York State NY Zip Code 10021

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

002
Category/
Type

Transaction ID: SB113305-555.6
Date of Disbursement

04 / 03 / 2007

Amount of Each Disbursement this Period

1018.57

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. US Bank

Mailing Address 10800 NE 8th St

City Bellevue State WA Zip Code 98004

Purpose of Disbursement
Credit card payment

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-556

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

1102.93

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Amazon.com

Mailing Address 1516 2nd Ave

City Seattle State WA Zip Code 98101

Purpose of Disbursement
Office Supplies

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-556.1

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

63.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Cash Vault

Mailing Address 800 Nicollet Mall

City Minneapolis State MN Zip Code 55402

Purpose of Disbursement
Catering

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-556.2

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

18.98

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

1102.93

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

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(check only one)

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Cingular Wireless

Mailing Address PO Box 60017

City
Los Angeles

State
CA

Zip Code
90060

Purpose of Disbursement
Technology Expense

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB113305-556.3

Date of Disbursement

04 / 02 / 2007

Amount of Each Disbursement this Period

180.66

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Cingular Wireless

Mailing Address PO Box 60017

City
Los Angeles

State
CA

Zip Code
90060

Purpose of Disbursement
Technology Expense

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB113305-556.4

Date of Disbursement

04 / 16 / 2007

Amount of Each Disbursement this Period

176.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Public Storage

Mailing Address Lake Union
Fairview Avenue N

City
Seattle

State
WA

Zip Code
98109

Purpose of Disbursement
Storage

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB113305-556.5

Date of Disbursement

04 / 03 / 2007

Amount of Each Disbursement this Period

369.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Friends of Maria

A. Tivo Full Name (Last, First, Middle Initial) Mailing Address 2160 Gold Street City Alvise State CA Zip Code 95002 Purpose of Disbursement Technology Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: SB113305-556.6 Date of Disbursement MM / DD / YYYY 04 / 11 / 2007 Amount of Each Disbursement this Period 6.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
B. Tivo Full Name (Last, First, Middle Initial) Mailing Address 2160 Gold Street City Alvise State CA Zip Code 95002 Purpose of Disbursement Technology Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: SB113305-556.7 Date of Disbursement MM / DD / YYYY 04 / 13 / 2007 Amount of Each Disbursement this Period 99.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
C. Tivo Full Name (Last, First, Middle Initial) Mailing Address 2160 Gold Street City Alvise State CA Zip Code 95002 Purpose of Disbursement Technology Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: SB113305-556.8 Date of Disbursement MM / DD / YYYY 04 / 25 / 2007 Amount of Each Disbursement this Period 39.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional)		0.00
TOTAL This Period (last page this line number only)		0.00

**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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Friends of Maria

A. UPS Full Name (Last, First, Middle Initial) Mailing Address 55 Glenlake Parkway, NE City Atlanta State GA Zip Code 30328 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: SB113305-556.9 Date of Disbursement MM / DD / YYYY 04 / 02 / 2007 Amount of Each Disbursement this Period 28.43 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
B. UPS Full Name (Last, First, Middle Initial) Mailing Address 55 Glenlake Parkway, NE City Atlanta State GA Zip Code 30328 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: SB113305-556.10 Date of Disbursement MM / DD / YYYY 04 / 16 / 2007 Amount of Each Disbursement this Period 16.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
C. UPS Full Name (Last, First, Middle Initial) Mailing Address 55 Glenlake Parkway, NE City Atlanta State GA Zip Code 30328 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: SB113305-556.11 Date of Disbursement MM / DD / YYYY 04 / 23 / 2007 Amount of Each Disbursement this Period 24.43 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

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(check only one)

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20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Friends of Maria

Full Name (Last, First, Middle Initial)

A. UPS

Mailing Address 55 Glenlake Parkway, NE

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
Shipping

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113305-556.12
Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

26.62

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US Bank

Mailing Address 10800 NE 8th St

City Bellevue State WA Zip Code 98004

Purpose of Disbursement
Credit card payment

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113305-557
Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

1123.21

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Amtrak

Mailing Address 60 Massachusetts Avenue NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Refund issued via credit card

Candidate Name

002
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113305-557.1
Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

-157.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

1123.21

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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Millenium Plaza

Mailing Address 1 United Nations Plaza

City
New York

State
NY

Zip Code
10017

Purpose of Disbursement
Lodging

Candidate Name

002

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB113305-557.2

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

1206.25

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US Bank

Mailing Address 10800 NE 8th St

City
Bellevue

State
WA

Zip Code
98004

Purpose of Disbursement
Bank Charge

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB113305-557.3

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

35.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US Bank

Mailing Address 10800 NE 8th St

City
Bellevue

State
WA

Zip Code
98004

Purpose of Disbursement
Bank Charge

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB113305-557.4

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

38.96

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. US Bank

Mailing Address 10800 NE 8th St

City Bellevue State WA Zip Code 98004

Purpose of Disbursement
Credit card payment

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113305-560

Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

1310.80

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. Cash Vault

Mailing Address 800 Nicollet Mall

City Minneapolis State MN Zip Code 55402

Purpose of Disbursement
Catering

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113305-560.1

Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

290.06

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Cingular Wireless

Mailing Address PO Box 60017

City Los Angeles State CA Zip Code 90060

Purpose of Disbursement
Technology Expense

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB113305-560.2

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

184.36

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

1310.80

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)

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. Full Name (Last, First, Middle Initial)
Cingular Wireless

Mailing Address PO Box 60017

City Los Angeles State CA Zip Code 90060

Purpose of Disbursement
Technology Expense

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-560.3

Date of Disbursement

05 / 16 / 2007

Amount of Each Disbursement this Period

180.21

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Public Storage

Mailing Address Lake Union
Fairview Avenue N

City Seattle State WA Zip Code 98109

Purpose of Disbursement
Storage

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-560.4

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

369.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 2160 Gold Street

City Alviso State CA Zip Code 95002

Purpose of Disbursement
Technology Expense

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-560.5

Date of Disbursement

05 / 11 / 2007

Amount of Each Disbursement this Period

6.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. Tivo

Mailing Address 2160 Gold Street

City State Zip Code
Alviso CA 95002

Purpose of Disbursement
Technology Expense

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-560.6

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

99.75

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Tivo

Mailing Address 2160 Gold Street

City State Zip Code
Alviso CA 95002

Purpose of Disbursement
Technology Expense

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-560.7

Date of Disbursement

05 / 25 / 2007

Amount of Each Disbursement this Period

39.90

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UPS

Mailing Address 55 Glenlake Parkway, NE

City State Zip Code
Atlanta GA 30328

Purpose of Disbursement
Shipping

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-560.8

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

18.48

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Maria

Full Name (Last, First, Middle Initial)

A. UPS

Mailing Address 55 Glenlake Parkway, NE

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
Shipping

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB113305-560.9

Date of Disbursement

05 / 29 / 2007

Amount of Each Disbursement this Period

87.14

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Windows Catering Company

Mailing Address 1125 North Royal St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Catering

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB144267-012

Date of Disbursement

05 / 19 / 2007

Amount of Each Disbursement this Period

1107.47

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. Windows Catering Company

Mailing Address 1125 North Royal St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Catering

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB144267-013

Date of Disbursement

06 / 10 / 2007

Amount of Each Disbursement this Period

369.15

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1476.62

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

107066.28

**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)

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☐ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c ☒ 21

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NAME OF COMMITTEE (In Full)

Friends of Maria

A. DSCC Full Name (Last, First, Middle Initial) Mailing Address 122 Maryland Ave NE City Washington State DC Zip Code 20002 Purpose of Disbursement Political Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: SB124980-015 Date of Disbursement MM / DD / YYYY 06 / 28 / 2007 Amount of Each Disbursement this Period 10000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B. Emily's List Full Name (Last, First, Middle Initial) Mailing Address 1120 Connecticut Ave NW Suite City Washington State DC Zip Code 20036 Purpose of Disbursement List Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: SB144334-009 Date of Disbursement MM / DD / YYYY 05 / 01 / 2007 Amount of Each Disbursement this Period 450.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] MEMOInkind
C. Jewish Federation Victims Fund Full Name (Last, First, Middle Initial) Mailing Address 2031 Third Avenue City Seattle State WA Zip Code 98121 Purpose of Disbursement Charitable Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: SB171048-002 Date of Disbursement MM / DD / YYYY 05 / 19 / 2007 Amount of Each Disbursement this Period 4150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
SUBTOTAL of Disbursements This Page (optional)		14150.00
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 99 / 102

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)
 Friends of Maria

A. Full Name (Last, First, Middle Initial)
 Planned Parenthood Votes Washington

Mailing Address 2001 East Madison Street

City State Zip Code
 Seattle WA 98112

Purpose of Disbursement
 Event Tickets

Candidate Name

007
 Category/
 Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB177295-001
 Date of Disbursement

04 / 25 / 2007

Amount of Each Disbursement this Period

1125.00

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ►

1125.00

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

15275.00

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 100 / 102

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Friends of Maria

Transaction ID: SC/10.1001

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

Maria Cantwell, - Personal Funds

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

General 2000-Debt

Mailing Address PO Box 12740

City Seattle

State WA

ZIP Code 98111

Original Amount of Loan

2271350.90

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2271350.90

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 2

D D
0 6

Y Y Y Y Y Y
2 0 0 1

None

None

% (apr)

☐ Yes

☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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)

2271350.90

TOTALS This Period (last page in this line only)

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

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 101 / 102	
	FOR LINE NUMBER: (check only one)	
	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Friends of Maria

Transaction ID: SC/10.1002

LOAN SOURCE Full Name (Last, First, Middle Initial) Maria Cantwell, - Personal Funds	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ General 2000-Debt
Mailing Address PO Box 12740	
City Seattle	State WA ZIP Code 98111

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
550000.00	478448.82	71551.18

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM DD YY 07 01 2002	None	5.1 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
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)	71551.18
TOTALS This Period (last page in this line only)	2342902.08

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

27020400129

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 102 / 102

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Friends of Maria

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ms. Maria Cantwell

Nature of Debt (Purpose):
Interest Payment

Mailing Address PO Box 12740

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

Transaction ID: D103396-000

3584.62

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

962.06

.00

4546.68

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
US Bank

Nature of Debt (Purpose):
Credit Card Payment

Mailing Address 10800 NE 8th St

City State ZIP Code
Bellevue WA 98004

Outstanding Balance Beginning This Period

Transaction ID: D113305-000

1874.81

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

7692.75

7636.69

1930.87

1) **SUBTOTALS** This Period This Page (optional).....

6477.55

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

6477.55

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

P	US POSTAGE AND FEES PAID DEC 10 2007 Mailed from ZIP 27516 3 lbs Priority Mail Rate Zone 3
	 endicia.com 071V00551845
USPS PRIORITY MAIL®	
ShipOnSite - Chapel Hill 300 Market Street, Suite 130 CHAPEL HILL, NC 27516	
SHIP TO:	Office of Public Records PO Box 5109 Alexandria, VA 22304-0109 22301
e/ USPS DELIVERY CONFIRM	
 9101 8052 1390 7241 6782 31	
ELECTRONIC RATE APPROVED # 805213907	

Shipped using PostalMate®

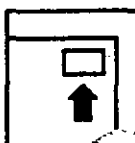


International Shipping Notice - Carriage hereunder may be subject to the rules relating to liability and other terms and conditions established by the Convention for the Unification of Certain Rules Relating to International Carriage by Air (the "Warsaw Convention") and/or the Convention on the Contract for the International Carriage of Goods by Road (the "CMR Convention"). These commodities, technology or software were exported from the U.S. in accordance with the Export Administration Regulations. Carriage contract is U.S. law prohibited. For shipping please, call 1-800-785-7885. United Parcel Service, Louisville, KY



▲ Complete address information or place label here ▲

COMPLETE ADDRESS AREA
print return address and
other information
in this area



2. PAYMENT METHOD

Affix postage or meter strip to area
indicated in upper right hand corner.

27020400131

NANCY ERICKSON
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7118
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____

Date of Receipt

USPS FIRST CLASS MAIL _____

Postmark

USPS REGISTERED/CERTIFIED _____

Postmark

USPS PRIORITY MAIL

12-10-07

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☒

USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

☐

UPS _____

☐

DHL _____

☐

AIRBORNE EXPRESS _____

☐

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE ☐

NO POSTMARK ☐

FAX _____

Date of Receipt

OTHER _____

Date of Receipt or Postmark

PREPARER

RD

DATE PREPARED

12-14-07

27020400132

27020400133

