

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Friends of Dave Reichert

ADDRESS (number and street) PO Box 2032 Iссаquah WA 98027

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00397737 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 07 / 01 / 2014 through 07 / 16 / 2014

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

Type or Print Name of Treasurer Kate Lind

Signature of Treasurer Kate Lind [Electronically Filed] Date 08 / 14 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Friends of Dave Reichert

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 07 / 16 / 2014

	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))....	17505.00	908415.79
(b) Total Contribution Refunds (from Line 20(d))	0.00	1350.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	17505.00	907065.79
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	44704.19	561954.77
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2394.65
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	44704.19	559560.12
8. Cash on Hand at Close of Reporting Period (from Line 27).....	479629.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Friends of Dave Reichert

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5500.00	379326.47
(ii) Unitemized.....	2005.00	60798.43
(iii) TOTAL of contributions from individuals ▶	7505.00	440124.90
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	468290.89
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	17505.00	908415.79
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.)		
	0.00	2394.65
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	1524.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	17505.00	912334.44

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	44704.19	561954.77
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	350.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1350.00
21. OTHER DISBURSEMENTS	2000.00	42525.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	46704.19	605829.77

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	508828.19
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	17505.00
25. SUBTOTAL (add Line 23 and Line 24).....	526333.19
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	46704.19
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	479629.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 50
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

A. Full Name (Last, First, Middle Initial)
WILLIAM G. BURNETT

Mailing Address 12283 NE COUNTRY CLUB RD

City BAINBRIDGE ISLAND State WA Zip Code 98110-2319

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : SA11.35385

Amount of Each Receipt this Period
 3000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM G. BURNETT

Mailing Address 12283 NE COUNTRY CLUB RD

City BAINBRIDGE ISLAND State WA Zip Code 98110-2319

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : SA11.35385B

Amount of Each Receipt this Period
 -400.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
WILLIAM G. BURNETT

Mailing Address 12283 NE COUNTRY CLUB RD

City BAINBRIDGE ISLAND State WA Zip Code 98110-2319

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : SA11.35526

Amount of Each Receipt this Period
 400.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 50
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

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

Mailing Address **2400 NW 80TH ST #162**

City **SEATTLE** State **WA** Zip Code **98117-4449**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 08 / 2014

Transaction ID : SA11.35480

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FRANK A. FIRMANI

Mailing Address **2400 NW 80TH ST #162**

City **SEATTLE** State **WA** Zip Code **98117-4449**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 08 / 2014

Transaction ID : SA11.35480B

Amount of Each Receipt this Period
-150.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
FRANK A. FIRMANI

Mailing Address **2400 NW 80TH ST #162**

City **SEATTLE** State **WA** Zip Code **98117-4449**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 08 / 2014

Transaction ID : SA11.35524

Amount of Each Receipt this Period
150.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 50
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

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

Mailing Address P.O. BOX 1759

City State Zip Code
CHELAN WA 98816-1759

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

Name of Employer Occupation
TSILLAN CELLARS PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 08 / 2014

Transaction ID : SA11.35494

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JACK C. MCRAE

Mailing Address 107 BELL ST APT 101

City State Zip Code
EDMONDS WA 98020-3209

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 08 / 2014

Transaction ID : SA11.35498

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address P.O. BOX 58339

City State Zip Code
RENTON WA 98058-1339

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

Name of Employer Occupation
ASSOCIATED ENERGY SYSTEMS MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11.35389

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

1500.00

5500.00

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

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

FOR LINE NUMBER: PAGE 8 OF 50
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

A. Full Name (Last, First, Middle Initial)
ASSOC FOR ADVANCED LIFE UNDERWRITING PAC

Mailing Address 11921 FREEDOM DR STE 1100

City RESTON State VA Zip Code 20190-5634

FEC ID number of contributing federal political committee. **C** C00447565

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2014

Transaction ID : SA11.35478

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ASSOCIATION OF FUNDRAISING PROFESSIONALS PAC

Mailing Address 4300 WISLON BOULEVARD #300

City ARLINGTON State VA Zip Code 22203-4179

FEC ID number of contributing federal political committee. **C** C00382143

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2014

Transaction ID : SA11.35477

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BRISTOL-MYERS SQUIBB CO EMPLOYEE PAF

Mailing Address 801 PENNSYLVANIA AVE NW SUITE 325

City WASHINGTON State DC Zip Code 20004-3634

FEC ID number of contributing federal political committee. **C** C00035675

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2014

Transaction ID : SA11.35476

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 50
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

A. GENERAL DYNAMICS PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2941 FAIRVIEW PARK DR STE 100
 City State Zip Code
 FALLS CHURCH VA 22042-4541
 FEC ID number of contributing federal political committee. **C C00078451**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014
Transaction ID : SA11.35503
 Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

B. GLAXOSMITHKLINE PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 13398
 City State Zip Code
 DURHAM NC 27709-3398
 FEC ID number of contributing federal political committee. **C C00199703**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 08 / 2014
Transaction ID : SA11.35479
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. MOLINA HEALTHCARE PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 OCEANGATE, STE 100
 City State Zip Code
 LONG BEACH CA 90802-4317
 FEC ID number of contributing federal political committee. **C C00430256**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 7000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 14 / 2014
Transaction ID : SA11.35502
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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

5500.00
 10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. JOEL BAXTER		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 23 WEST GALER STREET #400		Amount of Each Disbursement this Period 53.99
City SEATTLE	State WA	
Zip Code 98119	Purpose of Disbursement EXPENSE REIMBURSEMENT	Transaction ID : SB17.I7585
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. SARAH A. RUIZ-SHEEDY		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1517 198TH ST E		Amount of Each Disbursement this Period 36.87
City SPANAWAY	State WA	
Zip Code 98387	Purpose of Disbursement EXPENSE REIMBURSEMENT	Transaction ID : SB17.I7603
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SARAH A. RUIZ-SHEEDY		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 1517 198TH ST E		Amount of Each Disbursement this Period 79.00
City SPANAWAY	State WA	
Zip Code 98387	Purpose of Disbursement EXPENSE REIMBURSEMENT	Transaction ID : SB17.I7604
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	169.86
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 11 OF 50			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. ARTHUR J. WHITTEN			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014		
Mailing Address 233 3RD AVENUE N #19			Amount of Each Disbursement this Period 30.00		
City EDMONDS	State WA	Zip Code 98020	Transaction ID : SB17.I7608		
Purpose of Disbursement EXPENSE REIMBURSEMENT		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. ARTHUR J. WHITTEN			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014		
Mailing Address 233 3RD AVENUE N #19			Amount of Each Disbursement this Period 25.01		
City EDMONDS	State WA	Zip Code 98020	Transaction ID : SB17.I7609		
Purpose of Disbursement EXPENSE REIMBURSEMENT		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014		
Mailing Address PO BOX 53852			Amount of Each Disbursement this Period 0.87		
City PHOENIX	State AZ	Zip Code 85072-3852	Transaction ID : SB17.I7575		
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	55.88
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 12 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address PO BOX 53852		Amount of Each Disbursement this Period 3.04
City PHOENIX	State AZ	
Zip Code 85072-3852	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I7576
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address PO BOX 53852		Amount of Each Disbursement this Period 102.62
City PHOENIX	State AZ	
Zip Code 85072-3852	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I7697
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ASPECT CONSULTING LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 8401 EXCELSIOR DRIVE SUITE 103		Amount of Each Disbursement this Period 750.00
City MADISON	State WI	
Zip Code 53717	Purpose of Disbursement COMPLIANCE CONSULTING	Transaction ID : SB17.I7577
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	855.66
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 13 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address PO BOX 78522		Amount of Each Disbursement this Period 639.10
City PHOENIX	State AZ	
Zip Code 85062-8522	Purpose of Disbursement PHONE BILL	Transaction ID : SB17.I7578
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. BANK OF AMERICA		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 2800 NE 125TH ST		Amount of Each Disbursement this Period 4942.89
City SEATTLE	State WA	
Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT *SEE ITEMIZATION*	Transaction ID : SB17.I7580
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. 76		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO BOX 7200		Amount of Each Disbursement this Period 56.43
City BARTLESVILLE	State OK	
Zip Code 74005-7200	Purpose of Disbursement FUEL	Transaction ID : SB17.I7614
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5581.99
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 14 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. AL LAGO RISTORANTE		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 3110 SUMNER TAPPS HWY E		Amount of Each Disbursement this Period 330.04
City LAKE TAPPS State WA Zip Code 98391-6761	Purpose of Disbursement MEALS	
Candidate Name		Transaction ID : SB17.I7616 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2014
Mailing Address 1143 14TH AVENUE		Amount of Each Disbursement this Period 49.26
City SEATTLE State WA Zip Code 98122	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.I7639 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. ARCO		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 501 WESTLAKE PARK BLVD		Amount of Each Disbursement this Period 25.93
City HOUSTON State TX Zip Code 77079-2604	Purpose of Disbursement TRAVEL EXPENSE	
Candidate Name		Transaction ID : SB17.I7640 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 50			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. BALLOONPRINTINGCOM		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 3277 SW 14 PLACE		Amount of Each Disbursement this Period 15.00
City BOYNTON BEACH	State FL	
Zip Code 33426	Purpose of Disbursement PRINTING	Transaction ID : SB17.I7641
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. BALLOONPRINTINGCOM		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 3277 SW 14 PLACE		Amount of Each Disbursement this Period 205.46
City BOYNTON BEACH	State FL	
Zip Code 33426	Purpose of Disbursement PRINTING	Transaction ID : SB17.I7642
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. CHEVRON		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 6001 BOLLINGER CANYON RD		Amount of Each Disbursement this Period 38.48
City SAN RAMON	State CA	
Zip Code 94583-2324	Purpose of Disbursement FUEL	Transaction ID : SB17.I7646
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 50			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. CHEVRON		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 6001 BOLLINGER CANYON RD		Amount of Each Disbursement this Period 47.70
City SAN RAMON	State CA	
Zip Code 94583-2324	Purpose of Disbursement FUEL	Transaction ID : SB17.I7647
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. CHEVRON		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 6001 BOLLINGER CANYON RD		Amount of Each Disbursement this Period 77.59
City SAN RAMON	State CA	
Zip Code 94583-2324	Purpose of Disbursement FUEL	Transaction ID : SB17.I7648
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. COMCAST		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address PO BOX 173885		Amount of Each Disbursement this Period 187.38
City DENVER	State CO	
Zip Code 80217-3885	Purpose of Disbursement CABLE	Transaction ID : SB17.I7649
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 50			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. FRY'S		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2014
Mailing Address 800 GARDEN AVE N		Amount of Each Disbursement this Period 271.56
City RENTON State WA Zip Code 98055-1574	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.I7651 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. LIBERTY MUTUAL		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 100 LIBERTY WAY		Amount of Each Disbursement this Period 390.75
City DOVER State NH Zip Code 03820	Purpose of Disbursement INSURANCE	
Candidate Name	Category/Type	Transaction ID : SB17.I7654 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. M&M BALLOON CO		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 20015 WASHINGTON 99		Amount of Each Disbursement this Period 278.13
City LYNNWOOD State WA Zip Code 98046	Purpose of Disbursement COLLATERAL	
Candidate Name	Category/Type	Transaction ID : SB17.I7655 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 50			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. SECRETARY OF STATE		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address PO BOX 40234		Amount of Each Disbursement this Period 10.00
City OLYMPIA State WA Zip Code 98504-0220	Purpose of Disbursement FILING FEE	
Candidate Name	Category/Type	Transaction ID : SB17.I7610 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. SECRETARY OF STATE		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address PO BOX 40234		Amount of Each Disbursement this Period 1740.00
City OLYMPIA State WA Zip Code 98504-0220	Purpose of Disbursement FILING FEE	
Candidate Name	Category/Type	Transaction ID : SB17.I7611 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SHELL OIL		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address PO BOX 2463		Amount of Each Disbursement this Period 13.21
City HOUSTON State TX Zip Code 77252-2463	Purpose of Disbursement FUEL	
Candidate Name	Category/Type	Transaction ID : SB17.I7668 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. SHELL OIL		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address PO BOX 2463		Amount of Each Disbursement this Period 15.00
City HOUSTON State TX Zip Code 77252-2463	Purpose of Disbursement FUEL	
Candidate Name	Category/Type	Transaction ID : SB17.I7669 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. SPOT ON PRINTING & DESIGN		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 220 106TH AVE NE		Amount of Each Disbursement this Period 94.84
City BELLEVUE State WA Zip Code 98004-5728	Purpose of Disbursement PRINTING	
Candidate Name	Category/Type	Transaction ID : SB17.I7671 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 475 LENFANT PLZ SW		Amount of Each Disbursement this Period 490.00
City WASHINGTON State DC Zip Code 20260-0001	Purpose of Disbursement POSTAGE	
Candidate Name	Category/Type	Transaction ID : SB17.I7680 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 50			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 475 LENFANT PLZ SW		Amount of Each Disbursement this Period 5.80
City WASHINGTON	State DC	
Zip Code 20260-0001	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I7681
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 475 LENFANT PLZ SW		Amount of Each Disbursement this Period 5.80
City WASHINGTON	State DC	
Zip Code 20260-0001	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I7682
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 175 BELLEVUE SQ		Amount of Each Disbursement this Period 31.58
City BELLEVUE	State WA	
Zip Code 98004-5021	Purpose of Disbursement DATA PLAN	Transaction ID : SB17.I7684
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 175 BELLEVUE SQ		Amount of Each Disbursement this Period 31.58
City BELLEVUE	State WA	
Zip Code 98004-5021	Purpose of Disbursement DATA PLAN	Transaction ID : SB17.I7685
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. BANK OF AMERICA		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 2800 NE 125TH ST		Amount of Each Disbursement this Period 483.94
City SEATTLE	State WA	
Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT *SEE ITEMIZATION*	Transaction ID : SB17.I7581
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. 76		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address PO BOX 7200		Amount of Each Disbursement this Period 75.24
City BARTLESVILLE	State OK	
Zip Code 74005-7200	Purpose of Disbursement FUEL	Transaction ID : SB17.I7612
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	483.94
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)	PAGE 22 OF 50			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. ALASKA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 14.00
City SEATTLE	State WA	
Zip Code 98124-0948	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I7617
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. ALASKA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 13.00
City SEATTLE	State WA	
Zip Code 98124-0948	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I7618
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. ALASKA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 7.00
City SEATTLE	State WA	
Zip Code 98124-0948	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I7619
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. ALASKA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2014
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 21.00
City SEATTLE	State WA	
Zip Code 98124-0948	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I7620 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ALASKA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 7.00
City SEATTLE	State WA	
Zip Code 98124-0948	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I7621 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ALASKA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 7.00
City SEATTLE	State WA	
Zip Code 98124-0948	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I7622 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 50			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 175 BELLEVUE SQ		Amount of Each Disbursement this Period 35.00
City BELLEVUE State WA Zip Code 98004-5021	Purpose of Disbursement DATA PLAN	
Candidate Name		Transaction ID : SB17.I7690 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 175 BELLEVUE SQ		Amount of Each Disbursement this Period 35.00
City BELLEVUE State WA Zip Code 98004-5021	Purpose of Disbursement DATA PLAN	
Candidate Name		Transaction ID : SB17.I7691 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. WENATCHEE VALLEY TRUCK STOP		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 3607 STATE HIGHWAY 97A		Amount of Each Disbursement this Period 61.55
City WENATCHEE State WA Zip Code 98801-9623	Purpose of Disbursement FUEL	
Candidate Name		Transaction ID : SB17.I7694 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

A. WENATCHEE VALLEY TRUCK STOP

Full Name (Last, First, Middle Initial)
Mailing Address 3607 STATE HIGHWAY 97A

City WENATCHEE State WA Zip Code 98801-9623

Purpose of Disbursement FUEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 06 / 2014

Amount of Each Disbursement this Period: 59.55

Transaction ID : SB17.I7695

[MEMO ITEM]

B. WENATCHEE VALLEY TRUCK STOP

Full Name (Last, First, Middle Initial)
Mailing Address 3607 STATE HIGHWAY 97A

City WENATCHEE State WA Zip Code 98801-9623

Purpose of Disbursement FUEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 15 / 2014

Amount of Each Disbursement this Period: 72.65

Transaction ID : SB17.I7696

[MEMO ITEM]

C. BANK OF AMERICA

Full Name (Last, First, Middle Initial)
Mailing Address 2800 NE 125TH ST

City SEATTLE State WA Zip Code 98125-4331

Purpose of Disbursement CREDIT CARD PAYMENT *SEE ITEMIZATION*

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 01 / 2014

Amount of Each Disbursement this Period: 100.00

Transaction ID : SB17.I7582

SUBTOTAL of Disbursements This Page (optional) 100.00

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 26 OF 50			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 175 BELLEVUE SQ		Amount of Each Disbursement this Period 50.00
City BELLEVUE State WA Zip Code 98004-5021	Purpose of Disbursement DATA PLAN	
Candidate Name		Transaction ID : SB17.I7686
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2014
Mailing Address 175 BELLEVUE SQ		Amount of Each Disbursement this Period 50.00
City BELLEVUE State WA Zip Code 98004-5021	Purpose of Disbursement DATA PLAN	
Candidate Name		Transaction ID : SB17.I7687
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. BANK OF AMERICA		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 2800 NE 125TH ST		Amount of Each Disbursement this Period 3625.94
City SEATTLE State WA Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT *SEE ITEMIZATION*	
Candidate Name		Transaction ID : SB17.I7583
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	3625.94
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)	PAGE 27 OF 50			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 789.00
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement DATABASE SOFTWARE	Transaction ID : SB17.I7644
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 789.00
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement DATABASE SOFTWARE	Transaction ID : SB17.I7645
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. EXPEDIA		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2014
Mailing Address 333 108TH AVE NE		Amount of Each Disbursement this Period 1030.98
City BELLEVUE	State WA	
Zip Code 98004-5703	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I7650
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. HONDA CENTER		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 13291 SE 36TH ST		Amount of Each Disbursement this Period 502.08
City BELLEVUE	State WA	
Zip Code 98006-1328	Purpose of Disbursement CAMPAIGN VEHICLE LEASE	Transaction ID : SB17.I7652
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. MAILCHIMP		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 512 MEANS STREET SUITE 404		Amount of Each Disbursement this Period 150.00
City ATLANTA	State GA	
Zip Code 30318	Purpose of Disbursement ONLINE SERVICES	Transaction ID : SB17.I7656
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. MAILCHIMP		Date of Disbursement MM / DD / YYYY 05 / 26 / 2014
Mailing Address 512 MEANS STREET SUITE 404		Amount of Each Disbursement this Period 150.00
City ATLANTA	State GA	
Zip Code 30318	Purpose of Disbursement ONLINE SERVICES	Transaction ID : SB17.I7657
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 50			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. REGISTER.COM		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 575 8TH AVE FL 11		Amount of Each Disbursement this Period 27.95
City NEW YORK	State NY	
Zip Code 10018-3549	Purpose of Disbursement ONLINE SERVICES	Transaction ID : SB17.I7664
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. REGISTER.COM		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 575 8TH AVE FL 11		Amount of Each Disbursement this Period 0.99
City NEW YORK	State NY	
Zip Code 10018-3549	Purpose of Disbursement ONLINE SERVICES	Transaction ID : SB17.I7665
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. REGISTER.COM		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 575 8TH AVE FL 11		Amount of Each Disbursement this Period 27.95
City NEW YORK	State NY	
Zip Code 10018-3549	Purpose of Disbursement ONLINE SERVICES	Transaction ID : SB17.I7666
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 50			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. BANK OF AMERICA		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 2800 NE 125TH ST		Amount of Each Disbursement this Period 406.56
City SEATTLE State WA Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT *SEE ITEMIZATION*	
Candidate Name		Transaction ID : SB17.I7584
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 1143 14TH AVENUE		Amount of Each Disbursement this Period 12.49
City SEATTLE State WA Zip Code 98122	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.I7623
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 1143 14TH AVENUE		Amount of Each Disbursement this Period 13.54
City SEATTLE State WA Zip Code 98122	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.I7624
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	406.56
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 31 OF 50			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 1143 14TH AVENUE		Amount of Each Disbursement this Period 12.99
City SEATTLE	State WA Zip Code 98122	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Transaction ID : SB17.I7625
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 1143 14TH AVENUE		Amount of Each Disbursement this Period 12.40
City SEATTLE	State WA Zip Code 98122	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Transaction ID : SB17.I7626
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 1143 14TH AVENUE		Amount of Each Disbursement this Period 12.46
City SEATTLE	State WA Zip Code 98122	
Purpose of Disbursement OFFICE SUPPLIES	Candidate Name	Transaction ID : SB17.I7627
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	[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)		PAGE 32 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 1143 14TH AVENUE		Amount of Each Disbursement this Period 6.98
City SEATTLE	State WA Zip Code 98122	
Purpose of Disbursement OFFICE SUPPLIES	Category/Type	Transaction ID : SB17.I7628 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 1143 14TH AVENUE		Amount of Each Disbursement this Period 8.47
City SEATTLE	State WA Zip Code 98122	
Purpose of Disbursement OFFICE SUPPLIES	Category/Type	Transaction ID : SB17.I7629 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 1143 14TH AVENUE		Amount of Each Disbursement this Period 8.49
City SEATTLE	State WA Zip Code 98122	
Purpose of Disbursement OFFICE SUPPLIES	Category/Type	Transaction ID : SB17.I7630 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8.00
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 33 OF 50			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 1143 14TH AVENUE		Amount of Each Disbursement this Period 6.40
City SEATTLE State WA Zip Code 98122	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.I7631 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 1143 14TH AVENUE		Amount of Each Disbursement this Period 6.67
City SEATTLE State WA Zip Code 98122	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.I7632 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 1143 14TH AVENUE		Amount of Each Disbursement this Period 12.82
City SEATTLE State WA Zip Code 98122	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.I7633 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 50			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 1143 14TH AVENUE		Amount of Each Disbursement this Period 12.69
City SEATTLE State WA Zip Code 98122	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.I7634 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 1143 14TH AVENUE		Amount of Each Disbursement this Period -8.49
City SEATTLE State WA Zip Code 98122	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.I7635 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 1143 14TH AVENUE		Amount of Each Disbursement this Period 13.54
City SEATTLE State WA Zip Code 98122	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.I7636 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 50			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 1143 14TH AVENUE		Amount of Each Disbursement this Period 6.97
City SEATTLE State WA Zip Code 98122	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.I7637 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. AMAZON.COM		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 1143 14TH AVENUE		Amount of Each Disbursement this Period 8.64
City SEATTLE State WA Zip Code 98122	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.I7638 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 175 BELLEVUE SQ		Amount of Each Disbursement this Period 50.00
City BELLEVUE State WA Zip Code 98004-5021	Purpose of Disbursement DATA PLAN	
Candidate Name		Transaction ID : SB17.I7688 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 50			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 175 BELLEVUE SQ		Amount of Each Disbursement this Period 40.00
City BELLEVUE	State WA	
Zip Code 98004-5021	Purpose of Disbursement DATA PLAN	Transaction ID : SB17.I7689
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. CENTURYLINK		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 100 CENTURYLINK DR		Amount of Each Disbursement this Period 2166.00
City MONROE	State LA	
Zip Code 71203	Purpose of Disbursement CALL FORWARDING	Transaction ID : SB17.I7587
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CMDI		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 129.87
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement CREDIT CARD PROCESSING FEES	Transaction ID : SB17.I7588
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2295.87
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 37 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 350.89 Transaction ID : SB17.I7589
City FALLS CHURCH	State VA Zip Code 22043	
Purpose of Disbursement CREDIT CARD PROCESSING FEES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ISTREAM FINANCIAL SERVICES		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 13555 BISHOPS COURT #102		Amount of Each Disbursement this Period 62.96 Transaction ID : SB17.I7591
City BROOKFIELD	State WI Zip Code 53005	
Purpose of Disbursement CHECK PROCESSING FEE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. K&L GATES, LLP		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 925 4TH AVE STE 2900		Amount of Each Disbursement this Period 195.00 Transaction ID : SB17.I7592
City SEATTLE	State WA Zip Code 98104-1158	
Purpose of Disbursement ROOM RENTAL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	608.85
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 38 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. PAYROLLNW		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 10000 NE 7TH AVE STE 402		Amount of Each Disbursement this Period 2331.12
City VANCOUVER State WA Zip Code 98685-4548	Purpose of Disbursement PAYROLL TAX	
Candidate Name		Transaction ID : SB17.I7594
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. PAYROLLNW		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 10000 NE 7TH AVE STE 402		Amount of Each Disbursement this Period 6575.12
City VANCOUVER State WA Zip Code 98685-4548	Purpose of Disbursement PAYROLL *SEE ITEMIZATION*	
Candidate Name		Transaction ID : SB17.I7595
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. JOEL BAXTER		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 23 WEST GALER STREET #400		Amount of Each Disbursement this Period 1792.71
City SEATTLE State WA Zip Code 98119	Purpose of Disbursement PAYROLL	
Candidate Name		Transaction ID : SB17.I7705
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	8906.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 50			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. NICHOLAS J LIPINSKI			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014	
Mailing Address 12615 SE 307TH STREET			Amount of Each Disbursement this Period 313.47	
City AUBURN	State WA	Zip Code 98092	Transaction ID : SB17.I7706 [MEMO ITEM]	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. SARAH A. RUIZ-SHEEDY			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014	
Mailing Address 1517 198TH ST E			Amount of Each Disbursement this Period 1057.49	
City SPANAWAY	State WA	Zip Code 98387	Transaction ID : SB17.I7707 [MEMO ITEM]	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. FREDI SIMPSON			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014	
Mailing Address 504 KITTITAS ST			Amount of Each Disbursement this Period 1072.96	
City WENATCHEE	State WA	Zip Code 98801-2808	Transaction ID : SB17.I7708 [MEMO ITEM]	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. BLAKE VINTERTUN			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014	
Mailing Address 12523 NE 128TH WAY H-10			Amount of Each Disbursement this Period 1410.96	
City KIRKLAND	State WA	Zip Code 98034	Transaction ID : SB17.I7709 [MEMO ITEM]	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. ARTHUR J. WHITTEN			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014	
Mailing Address 233 3RD AVENUE N #19			Amount of Each Disbursement this Period 927.53	
City EDMONDS	State WA	Zip Code 98020	Transaction ID : SB17.I7710 [MEMO ITEM]	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. PAYROLLNW			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014	
Mailing Address 10000 NE 7TH AVE STE 402			Amount of Each Disbursement this Period 104.65	
City VANCOUVER	State WA	Zip Code 98685-4548	Transaction ID : SB17.I7596	
Purpose of Disbursement PAYROLL PROCESSING FEE		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	104.65
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	FOR LINE NUMBER: (check only one)	PAGE 41 OF 50			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. PAYROLLNW		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 10000 NE 7TH AVE STE 402		Amount of Each Disbursement this Period 6681.37
City VANCOUVER State WA Zip Code 98685-4548	Purpose of Disbursement PAYROLL *SEE ITEMIZATION*	
Candidate Name	Category/Type	Transaction ID : SB17.I7597
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. JOEL BAXTER		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 23 WEST GALER STREET #400		Amount of Each Disbursement this Period 1792.71
City SEATTLE State WA Zip Code 98119	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	Transaction ID : SB17.I7699 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. NICHOLAS J LIPINSKI		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 12615 SE 307TH STREET		Amount of Each Disbursement this Period 419.72
City AUBURN State WA Zip Code 98092	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	Transaction ID : SB17.I7700 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6681.37
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. SARAH A. RUIZ-SHEEDY		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 1517 198TH ST E		Amount of Each Disbursement this Period 1057.49
City SPANAWAY State WA Zip Code 98387	Purpose of Disbursement PAYROLL Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.I7701 [MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. FREDI SIMPSON		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 504 KITTITAS ST		Amount of Each Disbursement this Period 1072.96
City WENATCHEE State WA Zip Code 98801-2808	Purpose of Disbursement PAYROLL Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.I7702 [MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. BLAKE VINTERTUN		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 12523 NE 128TH WAY H-10		Amount of Each Disbursement this Period 1410.96
City KIRKLAND State WA Zip Code 98034	Purpose of Disbursement PAYROLL Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.I7703 [MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 50			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. ARTHUR J. WHITTEN		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 233 3RD AVENUE N #19		Amount of Each Disbursement this Period 927.53
City EDMONDS	State WA	
Zip Code 98020	Purpose of Disbursement PAYROLL	Transaction ID : SB17.I7704
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. PAYROLLNW		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 10000 NE 7TH AVE STE 402		Amount of Each Disbursement this Period 2366.57
City VANCOUVER	State WA	
Zip Code 98685-4548	Purpose of Disbursement PAYROLL TAX	Transaction ID : SB17.I7598
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PRESS CATS		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 18219 N LIDGERWOOD CT		Amount of Each Disbursement this Period 2020.00
City COLBERT	State WA	
Zip Code 99005-9826	Purpose of Disbursement PRINTING	Transaction ID : SB17.I7599
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4386.57
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

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

Mailing Address PO BOX 105428

City ATLANTA State GA Zip Code 30348-5428

Purpose of Disbursement INSURANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 01 / 2014

Amount of Each Disbursement this Period: 246.70

Transaction ID : SB17.I7600

Full Name (Last, First, Middle Initial)
B. ROWLEY PROPERTY MANAGEMENT

Mailing Address 1595 NW GILMAN BLVD #1

City ISSAQUAH State WA Zip Code 98027

Purpose of Disbursement OFFICE RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 01 / 2014

Amount of Each Disbursement this Period: 1008.63

Transaction ID : SB17.I7601

Full Name (Last, First, Middle Initial)
C. ROWLEY PROPERTY MANAGEMENT

Mailing Address 1595 NW GILMAN BLVD #1

City ISSAQUAH State WA Zip Code 98027

Purpose of Disbursement OFFICE RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 14 / 2014

Amount of Each Disbursement this Period: 700.00

Transaction ID : SB17.I7602

SUBTOTAL of Disbursements This Page (optional)..... 1955.33

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 50			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. SPOT ON PRINTING & DESIGN		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 220 106TH AVE NE		Amount of Each Disbursement this Period 492.12
City BELLEVUE State WA Zip Code 98004-5728	Purpose of Disbursement PRINTING	
Candidate Name	Category/Type	Transaction ID : SB17.I7605
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. THE CATALYST GROUP		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 600 PENNSYLVANIA AVE SE STE 330		Amount of Each Disbursement this Period 4000.00
City WASHINGTON State DC Zip Code 20003-6300	Purpose of Disbursement FUNDRAISING CONSULTING	
Candidate Name	Category/Type	Transaction ID : SB17.I7606
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. THE CATALYST GROUP		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 600 PENNSYLVANIA AVE SE STE 330		Amount of Each Disbursement this Period 3374.67
City WASHINGTON State DC Zip Code 20003-6300	Purpose of Disbursement EVENT REIMBURSEMENT *SEE ITEMIZATION*	
Candidate Name	Category/Type	Transaction ID : SB17.I7607
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7866.79
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 46 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. GEPETTO CATERING, INC.		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 4505 QUEENSBURY RD		Amount of Each Disbursement this Period 467.54
City RIVERDALE	State MD Zip Code 20737	
Purpose of Disbursement EVENT CATERING	Category/Type	Transaction ID : SB17.I7712 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MENUS CATERING		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 5458 3RD ST NE		Amount of Each Disbursement this Period 514.99
City WASHINGTON	State DC Zip Code 20011-6316	
Purpose of Disbursement EVENT CATERING	Category/Type	Transaction ID : SB17.I7711 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SONOMA RESTAURANT		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 223 PENNSYLVANIA AVE SE		Amount of Each Disbursement this Period 997.50
City WASHINGTON	State DC Zip Code 20003-1107	
Purpose of Disbursement EVENT CATERING	Category/Type	Transaction ID : SB17.I7720 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. THE CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 300 1ST ST SE		Amount of Each Disbursement this Period 7.66
City WASHINGTON State DC Zip Code 20003-1801	Purpose of Disbursement MEETING EXPENSE	
Candidate Name	Category/Type	Transaction ID : SB17.I7713 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. THE CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 300 1ST ST SE		Amount of Each Disbursement this Period 178.16
City WASHINGTON State DC Zip Code 20003-1801	Purpose of Disbursement MEETING EXPENSE	
Candidate Name	Category/Type	Transaction ID : SB17.I7714 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. THE CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 300 1ST ST SE		Amount of Each Disbursement this Period 813.20
City WASHINGTON State DC Zip Code 20003-1801	Purpose of Disbursement EVENT CATERING	
Candidate Name	Category/Type	Transaction ID : SB17.I7715 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 50			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial)
A. THE CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1801

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 25 / 2014

Amount of Each Disbursement this Period: 136.29

Transaction ID : SB17.I7716

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. THE CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1801

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 25 / 2014

Amount of Each Disbursement this Period: 16.09

Transaction ID : SB17.I7717

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. THE CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1801

Purpose of Disbursement EVENT CATERING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 26 / 2014

Amount of Each Disbursement this Period: 227.15

Transaction ID : SB17.I7718

[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)		PAGE 49 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. THE CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 300 1ST ST SE		Amount of Each Disbursement this Period 393.69
City WASHINGTON	State DC	
Zip Code 20003-1801	Purpose of Disbursement MEETING EXPENSE	Transaction ID : SB17.I7719 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. WA DEPARTMENT OF LICENSING		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 500 4TH AVENUE		Amount of Each Disbursement this Period 343.00
City SEATTLE	State WA	
Zip Code 98104	Purpose of Disbursement INSURANCE	Transaction ID : SB17.I7593
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. WELLS FARGO		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address PO BOX 6995		Amount of Each Disbursement this Period 50.69
City PORTLAND	State OR	
Zip Code 97228-6995	Purpose of Disbursement BANK FEE	Transaction ID : SB17.I7698
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	393.69
TOTAL This Period (last page this line number only).....	44479.19

**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 OF 50	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. CANTOR FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address PO BOX 17813		Amount of Each Disbursement this Period 2000.00
City RICHMOND	State VA Zip Code 23226-7813	
Purpose of Disbursement CAMPAIGN CONTRIBUTION - DEBT RETIREMENT		Transaction ID : SB21.I7586
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00