

**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

JOE KENT FOR CONGRESS

ADDRESS (number and street)

PO BOX 2133



Check if different than previously reported. (ACC)

BATTLE GROUND

WA

98604-2133

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00771394

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

WA

03

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

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

11

D D / Y Y Y Y

29

Y Y Y Y

2022

through

M M / D D / Y Y Y Y

12

D D / Y Y Y Y

31

Y Y Y Y

2022

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

DATWYLER, THOMAS, C., ,

Type or Print Name of Treasurer

Signature of Treasurer

DATWYLER, THOMAS, C., ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

15

Y Y Y Y

2023

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 25

Write or Type Committee Name  
**JOE KENT FOR CONGRESS**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
 11 / 29 / 2022

To:

M M / D D / Y Y Y Y  
 12 / 31 / 2022

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                          |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....                                              | 3752.01                 | 87771.73                           |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 252.00                  | 2363.30                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 3500.01                 | 85408.43                           |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 75412.68                | 173527.93                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....                                              | 207.17                  | 207.67                             |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 75205.51                | 173320.26                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....                                             | 52906.19                |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 205000.00               |                                    |

## 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 05/2016)

Write or Type Committee Name

JOE KENT FOR CONGRESS

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 9 |   | 2 | 0 | 2 | 2 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 3 | 1 |   | 2 | 0 | 2 | 2 |

**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).....

1104.48

24649.48

(ii) Unitemized.....

2647.53

63122.25

(iii) TOTAL of contributions from individuals ▶

3752.01

87771.73

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

3752.01

87771.73

## 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.) .....

207.17

207.67

## 15. OTHER RECEIPTS

(Dividends, Interest, etc.) .....

15911.00

97292.57

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

19870.18

185271.97

**DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 05/2016)

of Disbursements

PAGE 4 / 25

| II. DISBURSEMENTS                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....                                              | 75412.68                      | 173527.93                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:                                                         |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....                                                 | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                             |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 252.00                        | 2363.30                            |
| (b) Political Party Committees.....                                          | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 252.00                        | 2363.30                            |
| 21. OTHER DISBURSEMENTS .....                                                | 49779.62                      | 53125.66                           |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 125444.30                     | 229016.89                          |

**III. CASH SUMMARY**

|                                                                                       |           |
|---------------------------------------------------------------------------------------|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 158480.31 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 19870.18  |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                           | 178350.49 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 125444.30 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 52906.19  |

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5 OF 25

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

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NAME OF COMMITTEE (In Full)  
**JOE KENT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LARSEN, LAWRENCE, , ,**

Mailing Address 18503 93RD ST SE

|                   |             |                        |
|-------------------|-------------|------------------------|
| City<br>SNOHOMISH | State<br>WA | Zip Code<br>98290-6385 |
|-------------------|-------------|------------------------|

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

|                                              |                     |
|----------------------------------------------|---------------------|
| Name of Employer<br>SPECIALTY CONSULTING LLC | Occupation<br>C.F.O |
|----------------------------------------------|---------------------|

Receipt For: 2022  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 208.96

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 27  |   | 2022    |

Transaction ID : AB2347496511946BEB29

Amount of Each Receipt this Period

|        |
|--------|
| 104.48 |
|--------|

☐ Memo Item

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

Mailing Address 15009 STATE ROUTE 507 SE

|              |             |                        |
|--------------|-------------|------------------------|
| City<br>YELM | State<br>WA | Zip Code<br>98597-9812 |
|--------------|-------------|------------------------|

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

|                            |                   |
|----------------------------|-------------------|
| Name of Employer<br>MYSELF | Occupation<br>DOC |
|----------------------------|-------------------|

Receipt For: 2022  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 09  |   | 2022    |

Transaction ID : A67944E5D9EB44A2D9C8

Amount of Each Receipt this Period

|         |
|---------|
| 1000.00 |
|---------|

☐ Memo Item

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

Mailing Address

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

|                  |            |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

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

Election Cycle-to-Date ▼

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period

|  |
|--|
|  |
|--|

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

|         |
|---------|
| 1104.48 |
| 1104.48 |

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6 OF 25

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

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NAME OF COMMITTEE (In Full)

**JOE KENT FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A.****AARON, JOANNA, , ,**

Mailing Address PO BOX 122

City  
DOTYState  
WAZip Code  
98539-0122FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PRECISION ELECTRICOccupation  
BOOKKEEPER

Receipt For: 2022

☐ Primary ☐ General  
☒ Other (specify) ▼

RECOUNT

Election Cycle-to-Date ▼

500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 30 |   |   | 2022 |   |   |   |

Transaction ID : A2AAE3610651B469B9D1

Amount of Each Receipt this Period

500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

**BONE, RICHARD, , ,**

Mailing Address 311 WOODS LN

City  
ARDMOREState  
OKZip Code  
73401-1159FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
RETIRED

Receipt For: 2022

☐ Primary ☐ General  
☒ Other (specify) ▼

RECOUNT

Election Cycle-to-Date ▼

275.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 09 |   |   | 2022 |   |   |   |

Transaction ID : A3568C33F47B543F897E

Amount of Each Receipt this Period

25.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**BONE, RICHARD, , ,**

Mailing Address 311 WOODS LN

City  
ARDMOREState  
OKZip Code  
73401-1159FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
RETIRED

Receipt For: 2022

☐ Primary ☐ General  
☒ Other (specify) ▼

RECOUNT

Election Cycle-to-Date ▼

275.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 09 |   |   | 2022 |   |   |   |

Transaction ID : A75A63D2E40FD4642894

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

550.00

# **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)

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

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NAME OF COMMITTEE (In Full)  
**JOE KENT FOR CONGRESS**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |                                                                                                                                                                                      |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>BONE, RICHARD, , ,<br>Mailing Address 311 WOODS LN<br><br>City ARDMORE State OK Zip Code 73401-1159<br>FEC ID number of contributing federal political committee. C<br>Name of Employer INFORMATION REQUESTED Occupation RETIRED<br>Receipt For: 2022<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼ RECOUNT<br>Election Cycle-to-Date ▼ 275.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>12 09 2022<br>Transaction ID : A676A957261E34157A58<br>Amount of Each Receipt this Period<br>25.00<br><input type="checkbox"/> Memo Item |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>BONE, RICHARD, , ,<br>Mailing Address 311 WOODS LN<br><br>City ARDMORE State OK Zip Code 73401-1159<br>FEC ID number of contributing federal political committee. C<br>Name of Employer INFORMATION REQUESTED Occupation RETIRED<br>Receipt For: 2022<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼ RECOUNT<br>Election Cycle-to-Date ▼ 300.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>12 10 2022<br>Transaction ID : AA7C39E6AABA74E578B3<br>Amount of Each Receipt this Period<br>25.00<br><input type="checkbox"/> Memo Item |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>BONE, RICHARD, , ,<br>Mailing Address 311 WOODS LN<br><br>City ARDMORE State OK Zip Code 73401-1159<br>FEC ID number of contributing federal political committee. C<br>Name of Employer INFORMATION REQUESTED Occupation RETIRED<br>Receipt For: 2022<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼ RECOUNT<br>Election Cycle-to-Date ▼ 325.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>12 11 2022<br>Transaction ID : AFA264C692C884571969<br>Amount of Each Receipt this Period<br>25.00<br><input type="checkbox"/> Memo Item |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  | 75.00                                                                                                                                                                                |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |                                                                                                                                                                                      |  |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**JOE KENT FOR CONGRESS**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |                                                                                                                                                                                      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>BONE, RICHARD, , ,<br>Mailing Address 311 WOODS LN<br><br>City ARDMORE State OK Zip Code 73401-1159<br>FEC ID number of contributing federal political committee. C<br>Name of Employer INFORMATION REQUESTED Occupation RETIRED<br>Receipt For: 2022<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼ RECOUNT<br>Election Cycle-to-Date ▼ 350.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>12 12 2022<br>Transaction ID : AEFCAD6FC53714A7D8EA<br>Amount of Each Receipt this Period<br>25.00<br><input type="checkbox"/> Memo Item |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>BONE, RICHARD, , ,<br>Mailing Address 311 WOODS LN<br><br>City ARDMORE State OK Zip Code 73401-1159<br>FEC ID number of contributing federal political committee. C<br>Name of Employer INFORMATION REQUESTED Occupation RETIRED<br>Receipt For: 2022<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼ RECOUNT<br>Election Cycle-to-Date ▼ 375.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>12 13 2022<br>Transaction ID : A83EEBE93D09145ECBBB<br>Amount of Each Receipt this Period<br>25.00<br><input type="checkbox"/> Memo Item |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>BONE, RICHARD, , ,<br>Mailing Address 311 WOODS LN<br><br>City ARDMORE State OK Zip Code 73401-1159<br>FEC ID number of contributing federal political committee. C<br>Name of Employer INFORMATION REQUESTED Occupation RETIRED<br>Receipt For: 2022<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼ RECOUNT<br>Election Cycle-to-Date ▼ 390.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>12 30 2022<br>Transaction ID : AE5064AF571DE4F4181A<br>Amount of Each Receipt this Period<br>15.00<br><input type="checkbox"/> Memo Item |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  | 65.00                                                                                                                                                                                |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |                                                                                                                                                                                      |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**JOE KENT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BOUCHER, BONNIE, , ,**

Mailing Address PO BOX 362

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>MILTON | State<br>WA | Zip Code<br>98354-0362 |
|----------------|-------------|------------------------|

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

|                                    |                          |
|------------------------------------|--------------------------|
| Name of Employer<br>KANON ELECTRIC | Occupation<br>HR MANAGER |
|------------------------------------|--------------------------|

Receipt For: 2022  
☐ Primary ☐ General  
☒ Other (specify) ▼ **RECOUNT**

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2022

Transaction ID : AA32F0E71A0BF4328BE5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

Mailing Address 8603 SE LIESER POINT DR

|                   |             |                        |
|-------------------|-------------|------------------------|
| City<br>VANCOUVER | State<br>WA | Zip Code<br>98664-2354 |
|-------------------|-------------|------------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>RETIRED | Occupation<br>RETIRED |
|-----------------------------|-----------------------|

Receipt For: 2022  
☐ Primary ☐ General  
☒ Other (specify) ▼ **RECOUNT**

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 02 / 2022

Transaction ID : A4804942A5FEF4786A7C

Amount of Each Receipt this Period

2900.00

☐ Memo Item

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

Mailing Address 17116 LAKEPOINT DR SE

|              |             |                        |
|--------------|-------------|------------------------|
| City<br>YELM | State<br>WA | Zip Code<br>98597-9163 |
|--------------|-------------|------------------------|

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

|                                |                            |
|--------------------------------|----------------------------|
| Name of Employer<br>GLACIER NW | Occupation<br>TRUCK DRIVER |
|--------------------------------|----------------------------|

Receipt For: 2022  
☐ Primary ☐ General  
☒ Other (specify) ▼ **RECOUNT**

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2022

Transaction ID : A339B0360F7AA42E6AAA

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

4400.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 25

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

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NAME OF COMMITTEE (In Full)  
**JOE KENT FOR CONGRESS**

|                                                                                                                                                         |             |                                    |                                                        |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------|--------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>DUFF, AMANDA, W, ,</b>                                                                          |             |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>12 20 2022 |  |
| Mailing Address 601 BELMONT AVE E<br>APT E7                                                                                                             |             |                                    | <b>Transaction ID : AF339F6D9B7FC4FA5BC1</b>           |  |
| City<br>SEATTLE                                                                                                                                         | State<br>WA | Zip Code<br>98102-4890             |                                                        |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                         |             |                                    | Amount of Each Receipt this Period<br>500.00           |  |
| Name of Employer<br>RETIRED                                                                                                                             |             | Occupation<br>RETIRED              | <input type="checkbox"/> Memo Item                     |  |
| Receipt For: 2022<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼ RECOUNT |             | Election Cycle-to-Date ▼<br>500.00 |                                                        |  |

|                                                                                                                                                         |             |                                     |                                                        |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------|--------------------------------------------------------|--|
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>DUNCAN, LYNN, , ,</b>                                                                           |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>12 02 2022 |  |
| Mailing Address 6617 BELLEVISTA ST NW                                                                                                                   |             |                                     | <b>Transaction ID : ABE49FFD740F843EC9F7</b>           |  |
| City<br>OLYMPIA                                                                                                                                         | State<br>WA | Zip Code<br>98502-3319              |                                                        |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                         |             |                                     | Amount of Each Receipt this Period<br>1000.00          |  |
| Name of Employer<br>INFORMATION REQUESTED                                                                                                               |             | Occupation<br>RETIRED               | <input type="checkbox"/> Memo Item                     |  |
| Receipt For: 2022<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼ RECOUNT |             | Election Cycle-to-Date ▼<br>1000.00 |                                                        |  |

|                                                                                                                                                         |             |                                    |                                                        |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------|--------------------------------------------------------|--|
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>FELDCAMP, LARRY, , ,</b>                                                                        |             |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>12 01 2022 |  |
| Mailing Address 1420 MARVIN RD NE<br>STE C                                                                                                              |             |                                    | <b>Transaction ID : ADA1EC49050A54CD4BEB</b>           |  |
| City<br>LACEY                                                                                                                                           | State<br>WA | Zip Code<br>98516-3878             |                                                        |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                         |             |                                    | Amount of Each Receipt this Period<br>500.00           |  |
| Name of Employer<br>INFORMATION REQUESTED                                                                                                               |             | Occupation<br>RETIRED              | <input type="checkbox"/> Memo Item                     |  |
| Receipt For: 2022<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼ RECOUNT |             | Election Cycle-to-Date ▼<br>500.00 |                                                        |  |

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

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

2000.00

# **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)

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NAME OF COMMITTEE (In Full)  
**JOE KENT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LANHAM, BRUCE, , ,**

Mailing Address 199 EAGLE CREST DR

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>LONGVIEW | State<br>WA | Zip Code<br>98632-9354 |
|------------------|-------------|------------------------|

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

|                                           |                       |
|-------------------------------------------|-----------------------|
| Name of Employer<br>INFORMATION REQUESTED | Occupation<br>RETIRED |
|-------------------------------------------|-----------------------|

Receipt For: 2022  
☐ Primary ☐ General  
☒ Other (specify) ▼ **RECOUNT**

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 30 2022

Transaction ID : ACAA23E6DF4E246048E8

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

Mailing Address 532 MORNINGHOME RD

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>DANVILLE | State<br>CA | Zip Code<br>94526-3612 |
|------------------|-------------|------------------------|

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

|                             |                       |
|-----------------------------|-----------------------|
| Name of Employer<br>RETIRED | Occupation<br>RETIRED |
|-----------------------------|-----------------------|

Receipt For: 2022  
☐ Primary ☐ General  
☒ Other (specify) ▼ **RECOUNT**

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 02 2022

Transaction ID : A5AEE5A4D992B439EB4C

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

Mailing Address 242 SHAULIS RD

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>FRIEDENS | State<br>PA | Zip Code<br>15541-7914 |
|------------------|-------------|------------------------|

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

|                                           |                       |
|-------------------------------------------|-----------------------|
| Name of Employer<br>INFORMATION REQUESTED | Occupation<br>RETIRED |
|-------------------------------------------|-----------------------|

Receipt For: 2022  
☐ Primary ☐ General  
☒ Other (specify) ▼ **RECOUNT**

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 02 2022

Transaction ID : AF5C5F287924C46DCADB

Amount of Each Receipt this Period

300.00

☐ Memo Item

**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)

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NAME OF COMMITTEE (In Full)  
**JOE KENT FOR CONGRESS**

|                                                                                                                                                         |             |                                   |                                                              |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------|--------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>WERNER, MICHAEL, , ,</b>                                                                        |             |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br>12 / 02 / 2022 |  |
| Mailing Address 10009 SE EVERGREEN HWY                                                                                                                  |             |                                   | <b>Transaction ID : A5DAC7F0C6CCF4EBCB84</b>                 |  |
| City<br>VANCOUVER                                                                                                                                       | State<br>WA | Zip Code<br>98664-3731            | Amount of Each Receipt this Period<br>1000.00                |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                         |             | Memo Item                         |                                                              |  |
| Name of Employer<br>DMPI                                                                                                                                |             | Occupation<br>SELF                |                                                              |  |
| Receipt For: 2022<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼ RECOUNT |             | Election Cycle-to-Date<br>1000.00 |                                                              |  |

|                                                                                                                                 |       |                        |                                    |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------|------------------------|------------------------------------|--|
| <b>B.</b> Full Name (Last, First, Middle Initial)                                                                               |       |                        | Date of Receipt                    |  |
| Mailing Address                                                                                                                 |       |                        | M M / D D / Y Y Y Y Y Y            |  |
| City                                                                                                                            | State | Zip Code               | Amount of Each Receipt this Period |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |       | Memo Item              |                                    |  |
| Name of Employer                                                                                                                |       | Occupation             |                                    |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |       | Election Cycle-to-Date |                                    |  |

|                                                                                                                                 |       |                        |                                    |  |
|---------------------------------------------------------------------------------------------------------------------------------|-------|------------------------|------------------------------------|--|
| <b>C.</b> Full Name (Last, First, Middle Initial)                                                                               |       |                        | Date of Receipt                    |  |
| Mailing Address                                                                                                                 |       |                        | M M / D D / Y Y Y Y Y Y            |  |
| City                                                                                                                            | State | Zip Code               | Amount of Each Receipt this Period |  |
| FEC ID number of contributing federal political committee.<br>C                                                                 |       | Memo Item              |                                    |  |
| Name of Employer                                                                                                                |       | Occupation             |                                    |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |       | Election Cycle-to-Date |                                    |  |

|                                                                 |         |
|-----------------------------------------------------------------|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 9090.00 |

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 25

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

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NAME OF COMMITTEE (In Full)

JOE KENT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. 5411 LLC**

Mailing Address 8708 TURNING LEAF

City  
BOERNEState  
TXZip Code  
78015-6517Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 23  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

5863.95

Transaction ID : B5FA1B06899BC48A1968

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. 9SEVEN CONSULTING**

Mailing Address PO BOX 183

City  
HUDSONState  
WIZip Code  
54016Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 05  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

415.90

Transaction ID : B95230D6BAE54E9BB63

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 5555 HILTON STE 106

City  
NEW ORLEANSState  
LAZip Code  
70112Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 30  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

16.30

Transaction ID : BD862FEA83E824A2B8A8

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6296.15

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 25

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

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NAME OF COMMITTEE (In Full)

JOE KENT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ARISTOTLE INTERNATIONAL**

Mailing Address 205 PENNSYLVANIA AVENUE, SE

City  
WASHINGTONState  
DCZip Code  
20003-1164Purpose of Disbursement  
DATABASE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12  | 01  | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1400.00

Transaction ID : B51BD8B29D1CB422CB68

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CONERLY, COLBY, , ,**

Mailing Address PO BOX 2133

City  
BATTLE GROUNDState  
WAZip Code  
98604-2133Purpose of Disbursement  
EXPENSE REIMBURSEMENT

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12  | 19  | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

252.23

Transaction ID : BCF52807A432D4D60A0D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GONZALEZ, OZZIE, , ,**

Mailing Address PO BOX 2133

City  
BATTLE GROUNDState  
WAZip Code  
98604-2133Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12  | 07  | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

9000.00

Transaction ID : B5000E2B5960D438E949

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10652.23

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

JOE KENT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. HWY 99 CORPORATION**Mailing Address 499 SOUTH CAPITOL STREET SW  
#405City  
WASHINGTONState  
DCZip Code  
20003-4018Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 30  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

50000.00

Transaction ID : BEFB3675675A74F67AE8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JONES-PETERSON, KIMBERLY, , ,**

Mailing Address PO BOX 2133

City  
BATTLE GROUNDState  
WAZip Code  
98604-2133Purpose of Disbursement  
EXPENSE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 02  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

36.50

Transaction ID : B05BABB3B53BB4E84844

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JONES-PETERSON, KIMBERLY, , ,**

Mailing Address PO BOX 2133

City  
BATTLE GROUNDState  
WAZip Code  
98604-2133Purpose of Disbursement  
EXPENSE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 02  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

456.75

Transaction ID : B03744C9EF12A4235850

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

50493.25

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

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

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

FOR LINE NUMBER:  
(check only one)

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

JOE KENT FOR CONGRESS

Full Name (Last, First, Middle Initial)

## **A. MOBIL**

Mailing Address 1349 NW STATE AVE

City  
CHEHALIS

State  
WA

Zip Code  
98532-1832

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 21 / 2022

FEC Identification Number

C

Amount of Each Disbursement this Period

51.15

Transaction ID : BB00D96FF40134D7F98B

☒ Memo Item

Full Name (Last, First, Middle Initial)

## **B. PC SIGNS**

Mailing Address 2534 COMMERCE BLVD

City  
CINCINNATI

State  
OH

Zip Code  
45241-1504

Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 12 / 2022

FEC Identification Number

C

Amount of Each Disbursement this Period

527.01

Transaction ID : B36AE9BBDD0FA4746A06

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. ROUTE 4 ME**

Mailing Address 1010 N. FLORIDA AVENUE

City  
TAMPA

State  
FL

Zip Code  
33602-3895

Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 27 / 2022

FEC Identification Number

C

Amount of Each Disbursement this Period

249.00

Transaction ID : B4A728B2D6FA74BB1A12

☐ Memo Item

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

776.01

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 25

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

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NAME OF COMMITTEE (In Full)

JOE KENT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. TRANSFIRST**Mailing Address 12202 AIRPORT WAY  
SUITE 100City  
BROOMFIELDState  
COZip Code  
80021-2596Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 29 |   |   | 2022 |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

740.00

Transaction ID : BF1F331A079AE4284BEC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TRANSFIRST**Mailing Address 12202 AIRPORT WAY  
SUITE 100City  
BROOMFIELDState  
COZip Code  
80021-2596Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 08 |   |   | 2022 |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

5234.53

Transaction ID : B2CC03B75D7F6472EADF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. VENMO**

Mailing Address 95 MORTON ST

City  
NEW YORKState  
NYZip Code  
10014-3336Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 30 |   |   | 2022 |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

400.00

Transaction ID : B90686D3BBB504701A6D

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6374.53

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 25

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

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NAME OF COMMITTEE (In Full)

JOE KENT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WHEELER, PHILIP, , ,**

Mailing Address PO BOX 2133

City  
BATTLE GROUNDState  
WAZip Code  
98604-2133Purpose of Disbursement  
EXPENSE REIMBURSEMENT

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 02  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

124.54

Transaction ID : B53297055EF534149AD7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRED MEYER**

Mailing Address 11 GRANT RD

City  
EAST WENATCHEEState  
WAZip Code  
98802-5328Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 20  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

5.00

Transaction ID : BCD5AB2A0F28A474FAE1

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. FRED MEYER**

Mailing Address 11 GRANT RD

City  
EAST WENATCHEEState  
WAZip Code  
98802-5328Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 22  |   | 2022    |

FEC Identification Number

C

Amount of Each Disbursement this Period

24.99

Transaction ID : B5C4DC3F751324542BA2

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

124.54

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 25

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

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NAME OF COMMITTEE (In Full)

JOE KENT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. FRED MEYER**

Mailing Address 11 GRANT RD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 23  |   | 2022    |

City  
EAST WENATCHEEState  
WAZip Code  
98802-5328Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

20.03

Transaction ID : B879D5A92C41E4F0C980

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES, LLC**

Mailing Address 1776 WILSON BOULEVARD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 01  |   | 2022    |

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

23.45

Transaction ID : B2C8DCD6BED834A8AB61

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|     |   |     |   |         |

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

23.45

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

74740.16

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 25

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

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NAME OF COMMITTEE (In Full)

JOE KENT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. 9SEVEN CONSULTING**

Mailing Address PO BOX 183

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12  | 23  | 2022    |

City  
HUDSONState  
WIZip Code  
54016

FEC Identification Number

C

Purpose of Disbursement  
COMPLIANCE CONSULTING

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

750.00

Transaction ID : B217AE10FA5E343CBBB8

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 5555 HILTON STE 106

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 11  | 30  | 2022    |

City  
NEW ORLEANSState  
LAZip Code  
70112

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD FEES

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

127.30

Transaction ID : BD8B21647A56349478DA

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 5555 HILTON STE 106

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12  | 31  | 2022    |

City  
NEW ORLEANSState  
LAZip Code  
70112

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD FEES

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

309.52

Transaction ID : B85EE94A7DBA54533BB5

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

1186.82

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 25

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

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NAME OF COMMITTEE (In Full)

JOE KENT FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. OFFICE OF THE SECRETARY OF STATE**

Mailing Address 255 CAPITOL ST NE STE 151

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 09  |   | 2022    |

City  
SALEMState  
ORZip Code  
97310-1304

FEC Identification Number

C

Purpose of Disbursement  
FILING FEES

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

48589.05

Transaction ID : B1F43C8F106C94AE58C9

☐ 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. WINRED TECHNICAL SERVICES, LLC**

Mailing Address 1776 WILSON BOULEVARD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 29  |   | 2022    |

City  
ARLINGTONState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD FEES

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3.55

Transaction ID : B2DAE02027EFA462FAB7

☐ 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. WINRED TECHNICAL SERVICES, LLC**

Mailing Address 1776 WILSON BOULEVARD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 31  |   | 2022    |

City  
ARLINGTONState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD FEES

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

0.20

Transaction ID : BF2C82EE410D64F41B1A

☐ 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).....▶

48592.80

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

49779.62

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 22 OF 25

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CA335ABBA4FAA4B7294C

JOE KENT FOR CONGRESS

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

KENT, JOSEPH, , ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
PO BOX 2133

City

BATTLE GROUND

State

WA

ZIP Code

98604-2133

☒ Personal Funds of the Candidate

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 03<sup>M</sup> /D 29<sup>D</sup> /

Y 2021 Y

M 12<sup>M</sup> /D 31<sup>D</sup> /

Y 2022 Y

0.00

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

25000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 23 OF 25

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CC65919B313E6493982C

JOE KENT FOR CONGRESS

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

KENT, JOSEPH, , ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
PO BOX 2133

City

BATTLE GROUND

State

WA

ZIP Code

98604-2133

☒ Personal Funds of the Candidate

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 03 M /

D 31 D /

Y 2021 Y

M 12 M /

D 31 D /

Y 2022 Y

0.00

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

100000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 24 OF 25

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C1FEE95F911084BE5A9B

JOE KENT FOR CONGRESS

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

KENT, JOSEPH, , ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
PO BOX 2133

City

BATTLE GROUND

State

WA

ZIP Code

98604-2133

☒ Personal Funds of the Candidate

Original Amount of Loan

55000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

55000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 03 M /

D 29 D /

Y 2021 Y

M 12 M /

D 31 D /

Y 2022 Y

0.00

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

55000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 25 OF 25

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C21E249FC9DB34DA6BEB

JOE KENT FOR CONGRESS

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

KENT, JOSEPH, , ,

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
PO BOX 2133

City

BATTLE GROUND

State

WA

ZIP Code

98604-2133

☒ Personal Funds of the Candidate

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 03 M /

D 31 D /

Y 2021 Y

M 12 M /

D 31 D /

Y 2022 Y

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

25000.00

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

205000.00

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