

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

Check if different than previously reported. (ACC)

Issaquah

WA

98027

2. **FEC IDENTIFICATION NUMBER** ▼

C C00397737

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

WA

08

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

(a) Quarterly Reports:

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

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

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

Election on / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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

Type or Print Name of Treasurer Kate Lind

Signature of Treasurer Kate Lind

[Electronically Filed]

Date

/ /

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

Office Use Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Friends of Dave Reichert

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	136314.00	463539.01
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	136314.00	463539.01
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	97013.12	291218.47
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	4234.43
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	97013.12	286984.04
8. Cash on Hand at Close of Reporting Period (from Line 27).....	607306.82	
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).....	55225.00	176430.00
(ii) Unitemized.....	10089.00	30359.01
(iii) TOTAL of contributions from individuals ▶	65314.00	206789.01
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	71000.00	256750.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	136314.00	463539.01
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	4234.43
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	136314.00	467773.44

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	97013.12	291218.47
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	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	5000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	97013.12	296218.47

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	568005.94
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	136314.00
25. SUBTOTAL (add Line 23 and Line 24).....	704319.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	97013.12
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	607306.82

**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 92
	<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)
GERALD ANDERSON

Mailing Address 13814 SE 251ST ST

City State Zip Code
KENT WA 98042-6629

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 30 / 2015

Transaction ID : SA11.37283

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

Mailing Address 2716 ELLIOTT AVE APT 701

City State Zip Code
SEATTLE WA 98121-3510

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

Name of Employer Occupation
OLYMPIC EAGLE DISTRIBUTING CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 05 / 2015

Transaction ID : SA11.37343

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address 17371 NE 67TH CT STE A12

City State Zip Code
REDMOND WA 98052-4987

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

Name of Employer Occupation
BEATTY MARKETING & SALES LLC OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 27 / 2015

Transaction ID : SA11.37456

Amount of Each Receipt this Period
2700.00
CONTRIBUTION

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

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

3450.00

**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 92
	<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)
FRED E. BEVEGNI

Mailing Address 2707 17TH ST SW

City PUYALLUP State WA Zip Code 98373-6038

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

Name of Employer MARINE VIEW BEV Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 05 / 2015

Transaction ID : SA11.37344

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 7613 RANGE RD

City ALEXANDRIA State VA Zip Code 22306-2425

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.37541

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 4088 BEACH DR

City FREELAND State WA Zip Code 98249-9519

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2015

Transaction ID : SA11.37307

Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

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

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

2050.00

**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 92
	<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

Full Name (Last, First, Middle Initial) JIM BLAIR		Date of Receipt MM / DD / YYYY 08 / 04 / 2015
Mailing Address P.O. BOX 3114		Transaction ID : SA11.37357
City WENATCHEE	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period CONTRIBUTION 200.00
Name of Employer NORTH MERIDIAN TITLE & ESCROW LLC	Occupation CEO	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) ROBERT BOHRER		Date of Receipt MM / DD / YYYY 09 / 03 / 2015
Mailing Address 522 131ST AVE NE		Transaction ID : SA11.37478
City BELLEVUE	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period CONTRIBUTION 1000.00
Name of Employer ELEMAN, BOHRER & THULEN PS	Occupation ATTORNEY	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) GERRIT J. BOYLE		Date of Receipt MM / DD / YYYY 08 / 04 / 2015
Mailing Address 430 H STREET RD		Transaction ID : SA11.37342
City LYNDEN	State WA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period CONTRIBUTION 2700.00
Name of Employer ALASKA STRUCTURES	Occupation SALES	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	

SUBTOTAL of Receipts This Page (optional).....	3900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 92
	<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)
RAYMOND R. BRANDSTROM

Mailing Address 1905 SHENANDOAH DR E STE 500

City SEATTLE State WA Zip Code 98112-2325

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

Name of Employer CPM Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2015

Transaction ID : SA11.37290

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 14724 173RD AVE. NE

City WOODINVILLE State WA Zip Code 98072-6512

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

Name of Employer SEED I.P. LAW GROUP Occupation PATENT ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2015

Transaction ID : SA11.37278

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address 4757 FRANK LUKE DR STE 500 SUITE 500

City ADDISON State TX Zip Code 75001-3202

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

Name of Employer PERSONAL WAY TRANSPORTATION Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2015

Transaction ID : SA11.37362

Amount of Each Receipt this Period
 1500.00
 CONTRIBUTION

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

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

2750.00

**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 92
	<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)
MR. MARK K. CHAMBERLAIN

Mailing Address 4919 354TH AVE SE

City FALL CITY State WA Zip Code 98024-9753

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

Name of Employer LKD AEROSPACE, INC. Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2015

Transaction ID : SA11.37256

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARK K. CHAMBERLAIN

Mailing Address 4919 354TH AVE SE

City FALL CITY State WA Zip Code 98024-9753

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

Name of Employer LKD AEROSPACE, INC. Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.37256B

Amount of Each Receipt this Period
 -1300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
MR. MARK K. CHAMBERLAIN

Mailing Address 4919 354TH AVE SE

City FALL CITY State WA Zip Code 98024-9753

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

Name of Employer LKD AEROSPACE, INC. Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.37606

Amount of Each Receipt this Period
 1300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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

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

2500.00

**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 92
	<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)
RON CLAUDON

Mailing Address 30610 108TH AVE SE

City AUBURN State WA Zip Code 98092-3031

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

Name of Employer VALLEY BUICK GMC Occupation AUTO DEALER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : SA11.37510

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LINDSAY D. COOPER

Mailing Address 3733 NORTH TAZEWELL ST

City ARLINGTON State VA Zip Code 22207-4572

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2015

Transaction ID : SA11.37339

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address P.O. BOX 943

City KENT State WA Zip Code 98035-0943

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

Name of Employer BOEING Occupation ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2015

Transaction ID : SA11.37255

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 92
	<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)
LEONARD J. EBE

Mailing Address 1853 BIRCH BAY LYNDEN RD

City FERNDALE State WA Zip Code 98248-9702

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

Name of Employer SELF Occupation FARM

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 04 / 2015

Transaction ID : SA11.37359

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

Mailing Address 7413 E SHARP AVE

City SPOKANE VALLEY State WA Zip Code 99212-1177

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 23 / 2015

Transaction ID : SA11.37264

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

Mailing Address 1752 S FERNSIDE DR

City TACOMA State WA Zip Code 98465-1309

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 16 / 2015

Transaction ID : SA11.37274

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

1600.00

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

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

FOR LINE NUMBER: PAGE 12 OF 92
(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)
JOSEPH R. FORDE

Mailing Address 19543 SE 23RD ST

City ISSAQUAH State WA Zip Code 98075-7433

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

Name of Employer SELF Occupation CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 16 / 2015

Transaction ID : SA11.37266

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOYCE M. GARLAND

Mailing Address 605 E LAKE SAMMAMISH PKWY NE

City SAMMAMISH State WA Zip Code 98074-6911

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 04 / 2015

Transaction ID : SA11.37366

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 12600 SE 38TH STE 240

City BELLEVUE State WA Zip Code 98006-6112

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

Name of Employer PATTERN STRATEGY GROUP INC Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : SA11.37517

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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

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

3750.00

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

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

FOR LINE NUMBER: PAGE 13 OF 92
(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)
MARILYN V. GEARHART

Mailing Address P.O. BOX 427

City WATERVILLE State WA Zip Code 98858-0427

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 09 / 2015

Transaction ID : SA11.37241

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARILYN V. GEARHART

Mailing Address P.O. BOX 427

City WATERVILLE State WA Zip Code 98858-0427

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2015

Transaction ID : SA11.37381

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RICHARD A. GRAFMEYER

Mailing Address 101 CONSTITUTION AVE NW STE 675E

City WASHINGTON State DC Zip Code 20001-2281

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

Name of Employer CAPITOL TAX PARTNERS Occupation PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2015

Transaction ID : SA11.37340

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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)	PAGE 14 OF 92
	<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)
SCOTT C. HANNAH

Mailing Address 2700 RICHARDS RD.

City State Zip Code
BELLEVUE WA 98005-4200

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

Name of Employer Occupation
PACIFIC VALLEY FOODS EXPORTER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11.37543

Amount of Each Receipt this Period
250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SCOTT C. HANNAH

Mailing Address 2700 RICHARDS RD.

City State Zip Code
BELLEVUE WA 98005-4200

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

Name of Employer Occupation
PACIFIC VALLEY FOODS EXPORTER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11.37544

Amount of Each Receipt this Period
250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JACK H. HARBESTON

Mailing Address 15600 NE 8TH ST #B1-462

City State Zip Code
BELLEVUE WA 98008-3927

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

Name of Employer Occupation
IOTA PARTNERS CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 08 / 2015

Transaction ID : SA11.37242

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

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

750.00

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

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

FOR LINE NUMBER: PAGE 15 OF 92
(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)
FRED HOLTON

Mailing Address **P.O. BOX 2544**

City **BLAINE** State **WA** Zip Code **98231-2544**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1123.45

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 23 / 2015

Transaction ID : SA11.37267

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NORMAN E. HUBBARD

Mailing Address **6280 W MERCER WAY**

City **MERCER ISLAND** State **WA** Zip Code **98040-4850**

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

Name of Employer **SEATTLE CANCER CARE** Occupation **EVP**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 20 / 2015

Transaction ID : SA11.37250

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LAWRENCE P. HUGHES

Mailing Address **8865 OVERLAKE DR W**

City **MEDINA** State **WA** Zip Code **98039-5347**

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

Name of Employer **AMERICAN PILE DRIVING EQUIP.** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 16 / 2015

Transaction ID : SA11.37268

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 16 OF 92
(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)
LAWRENCE P. HUGHES

Mailing Address 8865 OVERLAKE DR W

City MEDINA State WA Zip Code 98039-5347

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

Name of Employer AMERICAN PILE DRIVING EQUIP. Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2015

Transaction ID : SA11.37390

Amount of Each Receipt this Period
 _____ 2700.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHRISTOPHER L. JAVENS

Mailing Address 2725 LINDA MARIE DR

City OAKTON State VA Zip Code 22124-1115

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

Name of Employer CAPITOL TAX PARTNERS Occupation PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2015

Transaction ID : SA11.37341

Amount of Each Receipt this Period
 _____ 1000.00

CONTRIBUTION

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

Mailing Address 333 108TH AVE. NE

City BELLEVUE State WA Zip Code 98004-5703

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

Name of Employer STEALHEAD PARTNERS LLC Occupation CO FOUNDER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 24 / 2015

Transaction ID : SA11.37334

Amount of Each Receipt this Period
 _____ 5400.00

CONTRIBUTION

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

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

_____ 9100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 92
	<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)
J MICHAEL JOHNSTON

Mailing Address 333 108TH AVE. NE

City State Zip Code
BELLEVUE WA 98004-5703

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

Name of Employer Occupation
STEALHEAD PARTNERS LLC CO FOUNDER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 19 / 2015

Transaction ID : SA11.37334B

Amount of Each Receipt this Period
-2700.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
J MICHAEL JOHNSTON

Mailing Address 333 108TH AVE. NE

City State Zip Code
BELLEVUE WA 98004-5703

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

Name of Employer Occupation
STEALHEAD PARTNERS LLC CO FOUNDER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 19 / 2015

Transaction ID : SA11.37610

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

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

Mailing Address 2935 170TH AVE SE

City State Zip Code
BELLEVUE WA 98008-6206

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

Name of Employer Occupation
OVERLAKE HOSPITAL REPRODUCTIVE HEALTH

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 20 / 2015

Transaction ID : SA11.37254

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 18 OF 92
(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)
RANDALL G. JOHNSON

Mailing Address 13618 116TH ST CT E

City PUYALLUP State WA Zip Code 98374-2473

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

Name of Employer AT I PT Occupation PHYSICAL THERAPIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2015

Transaction ID : SA11.37269

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RANDALL G. JOHNSON

Mailing Address 13618 116TH ST CT E

City PUYALLUP State WA Zip Code 98374-2473

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

Name of Employer AT I PT Occupation PHYSICAL THERAPIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : SA11.37518

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HOWARD W. KATZ

Mailing Address 7 LAKE BELLEVUE DR APT 206

City BELLEVUE State WA Zip Code 98005-2424

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2015

Transaction ID : SA11.37270

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

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

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

850.00

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

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

FOR LINE NUMBER: PAGE 19 OF 92
(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)
PETER KEEL

Mailing Address 33 WHITING ROAD

City State Zip Code
WELLESLEY MA 02481-6718

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

Name of Employer Occupation
FINANCE AT FIRST WIND SVP

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 06 / 2015

Transaction ID : SA11.37244

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 9006 VENN AVE SE

City State Zip Code
SNOQUALMIE WA 98065-5010

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

Name of Employer Occupation
AMAXRA SALES MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2015

Transaction ID : SA11.37281

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 3848 94TH AVE NE

City State Zip Code
YARROW POINT WA 98004-1320

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

Name of Employer Occupation
VWS US CORP MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2015

Transaction ID : SA11.37272

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 20 OF 92
(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)
SISSI E. LONGTHORPE

Mailing Address P.O. BOX 5071

City State Zip Code
KENT WA 98064-5071

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
880.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2015

Transaction ID : SA11.37280

Amount of Each Receipt this Period
 25.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SISSI E. LONGTHORPE

Mailing Address P.O. BOX 5071

City State Zip Code
KENT WA 98064-5071

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
880.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2015

Transaction ID : SA11.37350

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address 601 UNION ST STE 2500

City State Zip Code
SEATTLE WA 98101-4074

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

Name of Employer Occupation
NORTHWEST MUTUAL FINANCIAL ADVISOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2015

Transaction ID : SA11.37282

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

525.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 92
	<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)
DERYL MCCARTY

Mailing Address 15508 130TH ACE CT E

City PUYALLUP State WA Zip Code 98374-

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2015

Transaction ID : SA11.37251

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

Mailing Address 15508 130TH ACE CT E

City PUYALLUP State WA Zip Code 98374-

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : SA11.37507

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. ROBERT R. MCKAIG II

Mailing Address 18816 SE 42ND ST

City ISSAQUAH State WA Zip Code 98027-9366

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

Name of Employer MCKAIG EVERGREEN, INC. Occupation SALES ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2015

Transaction ID : SA11.37243

Amount of Each Receipt this Period
 3000.00
 CONTRIBUTION

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

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

3350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 92
	<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)
MR. ROBERT R. MCKAIG II

Mailing Address 18816 SE 42ND ST

City ISSAQUAH State WA Zip Code 98027-9366

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

Name of Employer MCKAIG EVERGREEN, INC. Occupation SALES ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 14 / 2015

Transaction ID : SA11.37243B

Amount of Each Receipt this Period
 -300.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
MR. ROBERT R. MCKAIG II

Mailing Address 18816 SE 42ND ST

City ISSAQUAH State WA Zip Code 98027-9366

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

Name of Employer MCKAIG EVERGREEN, INC. Occupation SALES ENGINEER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 14 / 2015

Transaction ID : SA11.37608

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
MR. STAN W. MCNAUGHTON

Mailing Address 4425 E LAKE GOODWIN RD

City STANWOOD State WA Zip Code 98292-7732

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

Name of Employer PEMCO INSURANCE Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 06 / 2015

Transaction ID : SA11.37245

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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

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

500.00

**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 23 OF 92
	<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)
MORONGO BAND MISSION INDIANS FUND

Mailing Address 11581 POTRERO RD

City BANNING State CA Zip Code 92220-6946

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

Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2015

Transaction ID : SA11.37529

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 801 E AVE

City ANACORTES State WA Zip Code 98221-1475

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 27 / 2015

Transaction ID : SA11.37326

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
T.J. PETRIZZO

Mailing Address 1315 94TH AVE NE

City CLYDE HILL State WA Zip Code 98004-3403

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

Name of Employer PETRIZZO GROUP Occupation FOUNDER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2015

Transaction ID : SA11.37253

Amount of Each Receipt this Period
 1500.00
 CONTRIBUTION

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

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

2600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 92
	<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)
CHARLES M. PIGOTT

Mailing Address P.O. BOX 1518

City State Zip Code
BELLEVUE WA 98009-1518

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 30 2015

Transaction ID : SA11.37567

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHARLES M. PIGOTT

Mailing Address P.O. BOX 1518

City State Zip Code
BELLEVUE WA 98009-1518

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 30 2015

Transaction ID : SA11.37567B

Amount of Each Receipt this Period
 -300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

C. Full Name (Last, First, Middle Initial)
CHARLES M. PIGOTT

Mailing Address P.O. BOX 1518

City State Zip Code
BELLEVUE WA 98009-1518

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 30 2015

Transaction ID : SA11.37604

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

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)	PAGE 25 OF 92
	<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)
ROBIN S. REICHERT

Mailing Address 40224 228TH WAY SE

City ENUMCLAW State WA Zip Code 98022-9053

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

Name of Employer WASHINGTON STATE PATROL Occupation POLICE LIEUTENANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : SA11.37524

Amount of Each Receipt this Period
125.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBIN S. REICHERT

Mailing Address 40224 228TH WAY SE

City ENUMCLAW State WA Zip Code 98022-9053

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

Name of Employer WASHINGTON STATE PATROL Occupation POLICE LIEUTENANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : SA11.37525

Amount of Each Receipt this Period
100.00

CONTRIBUTION

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

Mailing Address 2402 NW BLUE RIDGE DR

City SEATTLE State WA Zip Code 98177-5432

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

Name of Employer GM NAMEPLATE Occupation CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2015

Transaction ID : SA11.37265

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

1225.00

**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 26 OF 92
	<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)
JAMES D. RUSSELL

Mailing Address 5104 168TH AVE E

City LAKE TAPPS State WA Zip Code 98391-6742

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : SA11.37508

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL J. SEBASTIAN

Mailing Address 5066 ROCKAWAY BEACH RD NE

City BAINBRIDGE ISLAND State WA Zip Code 98110-3706

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 07 / 2015

Transaction ID : SA11.37392

Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN F. SHAW

Mailing Address 725 9TH AVE APT 1902

City SEATTLE State WA Zip Code 98104-2078

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2015

Transaction ID : SA11.37320

Amount of Each Receipt this Period
 300.00
 CONTRIBUTION

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 27 OF 92
	<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)
LINDA D. SIEGEL

Mailing Address 569 3RD CT FI

City State Zip Code
FOX ISLAND WA 98333-9761

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

Name of Employer Occupation
REGISTERED NURSE MULTICARE HEALTH SYSTEMS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : SA11.37526

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GRANT J. SILVERNALE

Mailing Address 129 3RD AVE P703

City State Zip Code
KIRKLAND WA 98033-6185

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2015

Transaction ID : SA11.37457

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

Mailing Address 2826 S BUCHANAN ST

City State Zip Code
ARLINGTON VA 22206-1306

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

Name of Employer Occupation
MORGAN MEGUIRE LLC PRESIDENT AND CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.37568

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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 28 OF 92
	<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)
RICHARD STECKLER

Mailing Address 17031 156TH AVE SE

City RENTON State WA Zip Code 98058-8671

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

Name of Employer: CLICK WHOLESALE DISTRIBUTING Occupation: PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 08 / 05 / 2015

Transaction ID : SA11.37345

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MATHEW PATRICK THOMAS

Mailing Address 107 NE 64TH ST

City SEATTLE State WA Zip Code 98115-6546

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

Name of Employer: PACIFIC NW EQUIPMENT Occupation: DIRECTOR OF SALES

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 600.00

Date of Receipt: 07 / 20 / 2015

Transaction ID : SA11.37252

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

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

Mailing Address 3450 W LAKE SAMMAMISH PKWY SE

City BELLEVUE State WA Zip Code 98008-5841

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

Name of Employer: TONER & CO. Occupation: EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 225.00

Date of Receipt: 08 / 07 / 2015

Transaction ID : SA11.37401

Amount of Each Receipt this Period: 75.00

CONTRIBUTION

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

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

825.00

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

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

FOR LINE NUMBER: PAGE 29 OF 92
(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)
LAWRENCE WILLCOX

Mailing Address **9325 RENSHAW DRIVE**

City **BETHESDA** State **MD** Zip Code **20817-2227**

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

Name of Employer **CAPITOL TAX PARTNERS** Occupation **PARTNER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
07 / 29 / 2015

Transaction ID : SA11.37325

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

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

1000.00

55225.00

**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 30 OF 92
	<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. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC

Mailing Address 1120 CONNECTICUT AVE NW

City WASHINGTON State DC Zip Code 20036-3905

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.37565

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF LIFE INSURERS PAC

Mailing Address 101 CONSTITUTION AVE NW STE 700

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00147066**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 10 / 2015

Transaction ID : SA11.37493

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF ENGINEERING PAC

Mailing Address 1015 15TH ST NW FL 8

City WASHINGTON State DC Zip Code 20005-2605

FEC ID number of contributing federal political committee. **C C00010868**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.37556

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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 31 OF 92
	<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. Full Name (Last, First, Middle Initial)
AMERICAN WIND ENERGY ASSOCIATION WINDPAC

Mailing Address 1501 M ST NW

City State Zip Code
D.C. DC 20005-1700

FEC ID number of contributing federal political committee. **C C00259572**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2015

Transaction ID : SA11.37472

Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

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

Mailing Address 1 AMGEN CENTER DR

City State Zip Code
NEWBURY PARK CA 91320-1730

FEC ID number of contributing federal political committee. **C C00251876**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.37554

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

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

Mailing Address 1735 NEW YORK AVE NW

City State Zip Code
WASHINGTON DC 20006-5209

FEC ID number of contributing federal political committee. **C C00139071**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.37563

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

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

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

9500.00

**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 32 OF 92
	<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. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2015

Transaction ID : SA11.37474

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2015

Transaction ID : SA11.37257

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 1201 15TH ST NW

City WASHINGTON State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.37535

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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 33 OF 92
	<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. Full Name (Last, First, Middle Initial)
BURNS AND MCDONNELL, INC. PAC

Mailing Address 9400 WARD PKWY

City State Zip Code
KANSAS CITY MO 64114-3319

FEC ID number of contributing federal political committee. **C C00442913**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 16 / 2015

Transaction ID : SA11.37260

Amount of Each Receipt this Period
3000.00

CONTRIBUTION

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

Mailing Address 601 PENNSYLVANIA AVE NW

City State Zip Code
WASHINGTON DC 20004-2601

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11.37538

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMMITTEE

Mailing Address 8400 WESTPARK DR

City State Zip Code
MCLEAN VA 22102-5116

FEC ID number of contributing federal political committee. **C C00040998**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 24 / 2015

Transaction ID : SA11.37533

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

5000.00

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

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

FOR LINE NUMBER: PAGE 34 OF 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

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

Mailing Address 805 15TH ST NW STE 650

City State Zip Code
WASHINGTON DC 20005-2281

FEC ID number of contributing federal political committee. **C C00458257**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2015

Transaction ID : SA11.37258

Amount of Each Receipt this Period
 3000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FEDERAL EXPRESS PAC

Mailing Address 942 S SHADY GROVE RD

City State Zip Code
MEMPHIS TN 38120-4117

FEC ID number of contributing federal political committee. **C C00068692**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2015

Transaction ID : SA11.37385

Amount of Each Receipt this Period
 1500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC CO. PAC

Mailing Address 1299 PENNSYLVANIA AVE NW STE 900W

City State Zip Code
WASHINGTON DC 20004-2400

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : SA11.37532

Amount of Each Receipt this Period
 1500.00
 CONTRIBUTION

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 35 OF 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

A. Full Name (Last, First, Middle Initial)
HNTB HOLDINGS LTD PAC

Mailing Address 715 KIRK DR

City State Zip Code
KANSAS CITY MO 64105-1310

FEC ID number of contributing federal political committee. **C C00386029**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 28 2015

Transaction ID : SA11.37335

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HOLDEN INDUSTRIES INC PAC

Mailing Address 500 LAKE COOK ROAD
STE 400

City State Zip Code
DEERFIELD IL 60015-5269

FEC ID number of contributing federal political committee. **C C00543561**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 30 2015

Transaction ID : SA11.37559

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
INTERNATIONAL ASSOC OF FIRE FIGHTERS PAC

Mailing Address 1750 NEW YORK AVE NW

City State Zip Code
WASHINGTON DC 20006-5305

FEC ID number of contributing federal political committee. **C C00029447**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 18 2015

Transaction ID : SA11.37528

Amount of Each Receipt this Period
 1500.00

CONTRIBUTION

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 92
	<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. Full Name (Last, First, Middle Initial)
INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES PAC

Mailing Address 7234 PARKWAY DR

City HANOVER State MD Zip Code 21076-1307

FEC ID number of contributing federal political committee. **C C00000885**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.37560

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

Mailing Address 1 S WACKER DR STE 2020

City CHICAGO State IL Zip Code 60606-4656

FEC ID number of contributing federal political committee. **C C00437244**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2015

Transaction ID : SA11.37337

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
K&L GATES LLP PAC

Mailing Address 1601 K ST NW STE 500

City WASHINGTON State DC Zip Code 20006-1682

FEC ID number of contributing federal political committee. **C C00213173**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.37537

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 37 OF 92
(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)
LOCKHEED MARTIN EMPLOYEES PAC

Mailing Address 1550 CRYSTAL DR STE 300

City ARLINGTON State VA Zip Code 22202-4110

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 20 / 2015

Transaction ID : SA11.37441

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MAKING AMERICA PROSPEROUS PAC

Mailing Address PO BOX 2485

City SPRINGFIELD State VA Zip Code 22152-0485

FEC ID number of contributing federal political committee. **C C00445379**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2015

Transaction ID : SA11.37261

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARSH & MCLENNAN COMPANIES, INC. PAC (MMCPAC)

Mailing Address 1166 6TH AVE

City NY State NY Zip Code 10036-2708

FEC ID number of contributing federal political committee. **C C00457234**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2015

Transaction ID : SA11.37473

Amount of Each Receipt this Period
 1500.00
 CONTRIBUTION

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 92
	<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. Full Name (Last, First, Middle Initial)
METLIFE, EMPLOYEES PAC

Mailing Address 1095 AVENUE OF THE AMERIFCAS AREA

City NEW YORK State NY Zip Code 10036-

FEC ID number of contributing federal political committee. **C C00040923**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2015

Transaction ID : SA11.37443

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 8403 COLESVILLE RD STE 1550

City SILVER SPRING State MD Zip Code 20910-6374

FEC ID number of contributing federal political committee. **C C00358812**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2015

Transaction ID : SA11.37475

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MMC CORP PAC

Mailing Address 10955 LOWELL, STE. 350

City OVERLAND PARK State KS Zip Code 66210-2408

FEC ID number of contributing federal political committee. **C C00509356**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2015

Transaction ID : SA11.37259

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

2500.00

**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 39 OF 92
	<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. Full Name (Last, First, Middle Initial)
MOLINA HEALTHCARE PAC

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 04 / 2015

Transaction ID : SA11.37384

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MORGAN STANLEY PAC

Mailing Address 1585 BROADWAY FL 9

City State Zip Code
NEW YORK NY 10036-8200

FEC ID number of contributing federal political committee. **C C00337626**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11.37558

Amount of Each Receipt this Period
1500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOC PAC

Mailing Address 1325 MASSACHUSETTS AVE NW

City State Zip Code
WASHINGTON DC 20005-4171

FEC ID number of contributing federal political committee. **C C00238725**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 21 / 2015

Transaction ID : SA11.37262

Amount of Each Receipt this Period
1500.00
CONTRIBUTION

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 92
	<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. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF CHEMICAL DISTRIBUTORS RESP

Mailing Address 1560 WILSON BLVD

City ARLINGTON State VA Zip Code 22209-2463

FEC ID number of contributing federal political committee. **C** C00379180

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2015

Transaction ID : SA11.37387

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOC. PAC

Mailing Address 1101 KING ST STE 600

City ALEXANDRIA State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 05 / 2015

Transaction ID : SA11.37388

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL EMERGENCY MEDICINE PAC

Mailing Address PO BOX 619911

City DALLAS State TX Zip Code 75261-9911

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2015

Transaction ID : SA11.37442

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: PAGE 41 OF 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

A. Full Name (Last, First, Middle Initial)
NEA FUND FOR CHILDREN & EDUCATION PAC

Mailing Address 1201 16TH ST NW STE 420

City State Zip Code
WASHINGTON DC 20036-3201

FEC ID number of contributing federal political committee. **C C00003251**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.37536

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NEXTERA ENERGY PAC

Mailing Address 700 UNIVERSE BLVD

City State Zip Code
JUNO BEACH FL 33408-2657

FEC ID number of contributing federal political committee. **C C00064774**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2015

Transaction ID : SA11.37263

Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NOVO NORDISK PAC

Mailing Address 500 NEW JERSEY AVE NW, STE 250

City State Zip Code
WASHINGTON DC 20001-2005

FEC ID number of contributing federal political committee. **C C00424838**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.37557

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 42 OF 92
	<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. Full Name (Last, First, Middle Initial)
NSSGA ROCK PAC

Mailing Address 1605 KING ST

City State Zip Code
ALEXANDRIA VA 22314-2726

FEC ID number of contributing federal political committee. **C C00089458**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11.37566

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

Mailing Address 2525 HARRODSBURG RD

City State Zip Code
LEXINGTON KY 40504-3355

FEC ID number of contributing federal political committee. **C C00360008**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11.37555

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PAC OF THE AMERICAN ASSOC OF ORTHO. SURG

Mailing Address 317 MASSACHUSETTS AVE NE

City State Zip Code
WASHINGTON DC 20002-5769

FEC ID number of contributing federal political committee. **C C00343137**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11.37539

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: PAGE 43 OF 92
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

A. Full Name (Last, First, Middle Initial)
PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION

Mailing Address 711 HIGH ST

City State Zip Code
DES MOINES IA 50392-0001

FEC ID number of contributing federal political committee. **C** C00128918

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 24 / 2015

Transaction ID : SA11.37531

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 1110 WILSON BLVD STE 1500

City State Zip Code
ARLINGTON VA 22209-2204

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.37562

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 430 N MICHIGAN AVE

City State Zip Code
CHICAGO IL 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 18 / 2015

Transaction ID : SA11.37530

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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 44 OF 92
	<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. Full Name (Last, First, Middle Initial)
RESPAC INC.

Mailing Address 11101 W 120TH AVE STE 400

City BROOMFIELD State CO Zip Code 80021-3436

FEC ID number of contributing federal political committee. **C** C00434142

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2015

Transaction ID : SA11.37471

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
S. C. JOHNSON & SON, INC POLITICAL ACTION COMMITTEE

Mailing Address 1525 HOWE ST

City RACINE State WI Zip Code 53403-2237

FEC ID number of contributing federal political committee. **C** C00342246

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2015

Transaction ID : SA11.37386

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SIEMENS CORPORATION PAC

Mailing Address 601 PENNSYLVANIA AVE NW STE 1100

City WASHINGTON State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00353797

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2015

Transaction ID : SA11.37470

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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 45 OF 92
	<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. Full Name (Last, First, Middle Initial)
THE WILLIAMS COMPANIES INC. PAC

Mailing Address 1627 1ST ST NW STE 900

City WASHINGTON State DC Zip Code 20001-1101

FEC ID number of contributing federal political committee. **C C00040394**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.37561

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TIAA-CREF PAC

Mailing Address 1101 PENNSYLVANIA AVE NW STE 800

City WASHINGTON State DC Zip Code 20004-2526

FEC ID number of contributing federal political committee. **C C00431361**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 18 / 2015

Transaction ID : SA11.37444

Amount of Each Receipt this Period
 1500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TOYOTA MOTOR NORTH AMERICA INC PAC

Mailing Address 601 THIRTEENTH STREET NW STE 910 S

City WASHINGTON State DC Zip Code 20005-3807

FEC ID number of contributing federal political committee. **C C00542365**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11.37564

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 92
	<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. Full Name (Last, First, Middle Initial)
UNITED MINE WORKERS OF AMERICA - COAL MINERS POLIT

Mailing Address 18354 QUANTICO GATEWAY DR

City State Zip Code
TRIANGLE VA 22172-1778

FEC ID number of contributing federal political committee. **C** C00013342

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 28 2015

Transaction ID : SA11.37336

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WINCO HOLDINGS INC PAC

Mailing Address 650 N ARMSTRONG PLACE

City State Zip Code
BOISE ID 83704-0825

FEC ID number of contributing federal political committee. **C** C00546903

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 07 2015

Transaction ID : SA11.37234

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

3000.00

71000.00

**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 47 OF 92			
	<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 / 23 / 2015
Mailing Address 12523 NE 128TH WAY H-10		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.I8752
City KIRKLAND	State WA	
Zip Code 98034	Purpose of Disbursement FUNDRAISING BONUS	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. ASPECT CONSULTING LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2015
Mailing Address 8401 EXCELSIOR DRIVE SUITE 103		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.I8674
City MADISON	State WI	
Zip Code 53717	Purpose of Disbursement COMPLIANCE CONSULTING	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. ASPECT CONSULTING LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2015
Mailing Address 8401 EXCELSIOR DRIVE SUITE 103		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.I8675
City MADISON	State WI	
Zip Code 53717	Purpose of Disbursement COMPLIANCE CONSULTING	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).....	3500.00
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 92	
	<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. ASPECT CONSULTING LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2015
Mailing Address 8401 EXCELSIOR DRIVE SUITE 103		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.I8676
City MADISON State WI Zip Code 53717	Purpose of Disbursement COMPLIANCE CONSULTING	
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 / 08 / 2015
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period 138.37 Transaction ID : SB17.I8677
City SEATTLE State WA Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT	
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 06 / 18 / 2015
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 7.50 Transaction ID : SB17.I8755 [MEMO ITEM]
City SEATTLE State WA Zip Code 98124-0948	Purpose of Disbursement TRAVEL EXPENSE	
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).....	888.37
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 49 OF 92			
	<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 / 08 / 2015
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period 209.50
City SEATTLE State WA Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT	
Candidate Name		Transaction ID : SB17.I8678
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. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
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	
Candidate Name		Transaction ID : SB17.I8836
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 / 08 / 2015
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period 227.93
City SEATTLE State WA Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT	
Candidate Name		Transaction ID : SB17.I8679
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).....	437.43
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 50 OF 92	
	<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 MM / DD / YYYY 07 / 01 / 2015
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period 75.00
City SEATTLE	State WA Zip Code 98125-4331	
Purpose of Disbursement BANK FEE	Category/Type	Transaction ID : SB17.I8757
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. MICROSOFT		Date of Disbursement MM / DD / YYYY 06 / 22 / 2015
Mailing Address 1 MICROSOFT WAY		Amount of Each Disbursement this Period 7.65
City REDMOND	State WA Zip Code 98052	
Purpose of Disbursement SOFTWARE	Category/Type	Transaction ID : SB17.I8803
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement MM / DD / YYYY 07 / 07 / 2015
Mailing Address 475 LENFANT PLZ SW		Amount of Each Disbursement this Period 6.78
City WASHINGTON	State DC Zip Code 20260-0001	
Purpose of Disbursement POSTAGE	Category/Type	Transaction ID : SB17.I8827
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)	[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 51 OF 92			
	<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 MM / DD / YYYY 07 / 07 / 2015
Mailing Address 475 LENFANT PLZ SW		Amount of Each Disbursement this Period 24.30
City WASHINGTON	State DC	
Zip Code 20260-0001	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I8828
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 MM / DD / YYYY 07 / 08 / 2015
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period 1967.30
City SEATTLE	State WA	
Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT	Transaction ID : SB17.I8680
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. CHEVRON		Date of Disbursement MM / DD / YYYY 06 / 08 / 2015
Mailing Address 6001 BOLLINGER CANYON RD		Amount of Each Disbursement this Period 13.03
City SAN RAMON	State CA	
Zip Code 94583-2324	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I8783
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).....	1967.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 92			
	<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. FIRENZE RISTORANTE ITALIA		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2015
Mailing Address 15600 NE 8TH ST		Amount of Each Disbursement this Period 789.23
City BELLEVUE State WA Zip Code 98008	Purpose of Disbursement EVENT CATERING	
Candidate Name		Transaction ID : SB17.I8788 [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. OFFICE MAX		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 12006-120TH PL NE KIRKLAND		Amount of Each Disbursement this Period 259.22
City KIRKLAND State WA Zip Code 98034	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.I8809 [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. SPOT ON PRINTING & DESIGN		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2015
Mailing Address 220 106TH AVE NE		Amount of Each Disbursement this Period 213.65
City BELLEVUE State WA Zip Code 98004-5728	Purpose of Disbursement PRINTING	
Candidate Name		Transaction ID : SB17.I8818 [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 53 OF 92			
	<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 06 / 18 / 2015
Mailing Address 220 106TH AVE NE		Amount of Each Disbursement this Period 479.10
City BELLEVUE	State WA	Zip Code 98004-5728
Purpose of Disbursement PRINTING	Category/Type	
Candidate Name	Transaction ID : SB17.I8819	
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 06 / 12 / 2015
Mailing Address 475 LENFANT PLZ SW		Amount of Each Disbursement this Period 147.00
City WASHINGTON	State DC	Zip Code 20260-0001
Purpose of Disbursement POSTAGE	Category/Type	
Candidate Name	Transaction ID : SB17.I8832	
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 / 29 / 2015
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	Category/Type	
Candidate Name	Transaction ID : SB17.I8835	
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 54 OF 92			
	<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 / 08 / 2015
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period 2630.76
City SEATTLE	State WA	
Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT	Transaction ID : SB17.I8681
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 06 / 23 / 2015
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 282.00
City SEATTLE	State WA	
Zip Code 98124-0948	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I8753
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 / 29 / 2015
Mailing Address PO BOX 24948		Amount of Each Disbursement this Period 206.00
City SEATTLE	State WA	
Zip Code 98124-0948	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I8754
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).....	2630.76
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 55 OF 92			
	<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 06 / 30 / 2015
Mailing Address PO BOX 78522		Amount of Each Disbursement this Period 766.10
City PHOENIX	State AZ	
Zip Code 85062-8522		
Purpose of Disbursement PHONE BILL		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. CENTURYLINK		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2015
Mailing Address 100 CENTURYLINK DR		Amount of Each Disbursement this Period 36.00
City MONROE	State LA	
Zip Code 71203		
Purpose of Disbursement PHONE SERVICES		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. CENTURYLINK		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2015
Mailing Address 100 CENTURYLINK DR		Amount of Each Disbursement this Period 34.48
City MONROE	State LA	
Zip Code 71203		
Purpose of Disbursement PHONE SERVICES		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 56 OF 92			
	<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 / 06 / 2015
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 83.12
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement DATABASE SOFTWARE	Transaction ID : SB17.I8773 [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. CMDI		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2015
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.I8774 [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. ISSAQUAH MINI-STORAGE		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 6011 E LAKE SAMMAMISH PKWY		Amount of Each Disbursement this Period 235.00
City ISSAQUAH	State WA	
Zip Code 98029	Purpose of Disbursement STORAGE RENT	Transaction ID : SB17.I8794 [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 57 OF 92			
	<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. MAILCHIMP		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2015
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 EMAIL SERVICES	Category/Type	Transaction ID : SB17.I8799
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. MICROSOFT		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2015
Mailing Address 1 MICROSOFT WAY		Amount of Each Disbursement this Period 26.28
City REDMOND	State WA Zip Code 98052	
Purpose of Disbursement SOFTWARE	Category/Type	Transaction ID : SB17.I8804
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)	[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 / 24 / 2015
Mailing Address 575 8TH AVE FL 11		Amount of Each Disbursement this Period 22.78
City NEW YORK	State NY Zip Code 10018-3549	
Purpose of Disbursement WEBSITE SERVICES	Category/Type	Transaction ID : SB17.I8812
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)	[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 58 OF 92		
	<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 08 / 10 / 2015
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period 35.40
City SEATTLE	State WA	
Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT	Transaction ID : SB17.I8682
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. MICROSOFT		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2015
Mailing Address 1 MICROSOFT WAY		Amount of Each Disbursement this Period 7.65
City REDMOND	State WA	
Zip Code 98052	Purpose of Disbursement SOFTWARE	Transaction ID : SB17.I8802
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. USPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015
Mailing Address 475 LENFANT PLZ SW		Amount of Each Disbursement this Period 5.75
City WASHINGTON	State DC	
Zip Code 20260-0001	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I8826
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).....	35.40
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 59 OF 92			
	<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 08 / 10 / 2015
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period 49.00
City SEATTLE State WA Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT	
Candidate Name	Category/Type	Transaction ID : SB17.I8683
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify)	

Full Name (Last, First, Middle Initial) B. BANK OF AMERICA		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2015
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period 49.00
City SEATTLE State WA Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT	
Candidate Name	Category/Type	Transaction ID : SB17.I8684
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify)	

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 475 LENFANT PLZ SW		Amount of Each Disbursement this Period 49.00
City WASHINGTON State DC Zip Code 20260-0001	Purpose of Disbursement POSTAGE	
Candidate Name	Category/Type	Transaction ID : SB17.I8829 [MEMO ITEM]
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	89.00
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 60 OF 92		
	<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 08 / 10 / 2015
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period 56.27
City SEATTLE	State WA	
Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT	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. CHEVRON		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2015
Mailing Address 6001 BOLLINGER CANYON RD		Amount of Each Disbursement this Period 47.28
City SAN RAMON	State CA	
Zip Code 94583-2324	Purpose of Disbursement TRAVEL EXPENSE	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. BANK OF AMERICA		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2015
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period 1478.43
City SEATTLE	State WA	
Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT	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).....	1534.70
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 61 OF 92			
	<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 / 20 / 2015
Mailing Address PO BOX 78522		Amount of Each Disbursement this Period 110.23
City PHOENIX	State AZ	
Zip Code 85062-8522		
Purpose of Disbursement PHONE BILL		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. BANK OF AMERICA		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2015
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period 39.00
City SEATTLE	State WA	
Zip Code 98125-4331		
Purpose of Disbursement BANK 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. CHEVRON		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2015
Mailing Address 6001 BOLLINGER CANYON RD		Amount of Each Disbursement this Period 35.97
City SAN RAMON	State CA	
Zip Code 94583-2324		
Purpose of Disbursement TRAVEL EXPENSE		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 62 OF 92			
	<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 07 / 20 / 2015
Mailing Address 6001 BOLLINGER CANYON RD		Amount of Each Disbursement this Period 39.64
City SAN RAMON	State CA	
Zip Code 94583-2324	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I8782
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. EXPEDIA		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2015
Mailing Address 333 108TH AVE NE		Amount of Each Disbursement this Period 993.52
City BELLEVUE	State WA	
Zip Code 98004-5703	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.I8787
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. OFFICE MAX		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2015
Mailing Address 12006-120TH PL NE KIRKLAND		Amount of Each Disbursement this Period 38.31
City KIRKLAND	State WA	
Zip Code 98034	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I8807
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 63 OF 92			
	<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. OFFICE MAX		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2015
Mailing Address 12006-120TH PL NE KIRKLAND		Amount of Each Disbursement this Period 27.36
City KIRKLAND State WA Zip Code 98034	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name	Category/Type	Transaction ID : SB17.I8808 [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 07 / 14 / 2015
Mailing Address 220 106TH AVE NE		Amount of Each Disbursement this Period 136.62
City BELLEVUE State WA Zip Code 98004-5728	Purpose of Disbursement PRINTING	
Candidate Name	Category/Type	Transaction ID : SB17.I8817 [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 07 / 28 / 2015
Mailing Address 475 LENFANT PLZ SW		Amount of Each Disbursement this Period 35.45
City WASHINGTON State DC Zip Code 20260-0001	Purpose of Disbursement POSTAGE	
Candidate Name	Category/Type	Transaction ID : SB17.I8833 [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 64 OF 92			
	<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 08 / 10 / 2015
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period 2038.37
City SEATTLE State WA Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT	
Candidate Name	Category/Type	Transaction ID : SB17.I8687
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. AT&T		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2015
Mailing Address PO BOX 78522		Amount of Each Disbursement this Period 722.51
City PHOENIX State AZ Zip Code 85062-8522	Purpose of Disbursement PHONE BILL	
Candidate Name	Category/Type	Transaction ID : SB17.I8762
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:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. CENTURYLINK		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2015
Mailing Address 100 CENTURYLINK DR		Amount of Each Disbursement this Period 35.15
City MONROE State LA Zip Code 71203	Purpose of Disbursement PHONE SERVICES	
Candidate Name	Category/Type	Transaction ID : SB17.I8778
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:		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....	2038.37
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 65 OF 92			
	<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 08 / 04 / 2015
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 207.65
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement DATABASE SOFTWARE	Transaction ID : SB17.I8771 [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. CMDI		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2015
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.I8772 [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. ISSAQUAH MINI-STORAGE		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2015
Mailing Address 6011 E LAKE SAMMAMISH PKWY		Amount of Each Disbursement this Period 235.00
City ISSAQUAH	State WA	
Zip Code 98029	Purpose of Disbursement STORAGE RENT	Transaction ID : SB17.I8793 [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 66 OF 92	
	<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. MICROSOFT		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2015
Mailing Address 1 MICROSOFT WAY		Amount of Each Disbursement this Period 26.28
City REDMOND	State WA	
Zip Code 98052	Purpose of Disbursement SOFTWARE	Transaction ID : SB17.I8805
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 07 / 22 / 2015
Mailing Address 575 8TH AVE FL 11		Amount of Each Disbursement this Period 22.78
City NEW YORK	State NY	
Zip Code 10018-3549	Purpose of Disbursement WEBSITE SERVICES	Transaction ID : SB17.I8813
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. BANK OF AMERICA		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2015
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period 40.00
City SEATTLE	State WA	
Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT	Transaction ID : SB17.I8688
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).....	40.00
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 67 OF 92			
	<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 09 / 08 / 2015
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period 87.69
City SEATTLE	State WA	
Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT	Transaction ID : SB17.I8689
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. AT&T		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2015
Mailing Address PO BOX 78522		Amount of Each Disbursement this Period 25.30
City PHOENIX	State AZ	
Zip Code 85062-8522	Purpose of Disbursement PHONE BILL	Transaction ID : SB17.I8760
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. MICROSOFT		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2015
Mailing Address 1 MICROSOFT WAY		Amount of Each Disbursement this Period 7.65
City REDMOND	State WA	
Zip Code 98052	Purpose of Disbursement SOFTWARE	Transaction ID : SB17.I8801
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).....	87.69
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 68 OF 92			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Friends of Dave Reichert

Full Name (Last, First, Middle Initial) A. BANK OF AMERICA		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>08</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	09		08		2015
M M	/	D D	/	Y Y Y Y								
09		08		2015								
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period <table border="1"> <tr> <td>327.85</td> </tr> </table>	327.85									
327.85												
City SEATTLE State WA Zip Code 98125-4331	Transaction ID : SB17.I8690											
Purpose of Disbursement CREDIT CARD PAYMENT												
Candidate Name	Category/Type											
Office Sought: House Senate President	Disbursement For: Primary General Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial) B. BANK OF AMERICA		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>08</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	09		08		2015
M M	/	D D	/	Y Y Y Y								
09		08		2015								
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period <table border="1"> <tr> <td>460.00</td> </tr> </table>	460.00									
460.00												
City SEATTLE State WA Zip Code 98125-4331	Transaction ID : SB17.I8691											
Purpose of Disbursement CREDIT CARD PAYMENT												
Candidate Name	Category/Type											
Office Sought: House Senate President	Disbursement For: Primary General Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial) C. BANK OF AMERICA		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>10</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		10		2015
M M	/	D D	/	Y Y Y Y								
08		10		2015								
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period <table border="1"> <tr> <td>12.97</td> </tr> </table>	12.97									
12.97												
City SEATTLE State WA Zip Code 98125-4331	Transaction ID : SB17.I8811											
Purpose of Disbursement BANK FEE												
Candidate Name	Category/Type											
Office Sought: House Senate President	Disbursement For: Primary General Other (specify)											
State: District:												

SUBTOTAL of Disbursements This Page (optional).....	787.85
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 69 OF 92	
	<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 09 / 03 / 2015
Mailing Address 220 106TH AVE NE		Amount of Each Disbursement this Period 104.03
City BELLEVUE State WA Zip Code 98004-5728	Purpose of Disbursement PRINTING	
Candidate Name	Category/Type	Transaction ID : SB17.I8816 [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. USPS		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2015
Mailing Address 475 LENFANT PLZ SW		Amount of Each Disbursement this Period 196.00
City WASHINGTON State DC Zip Code 20260-0001	Purpose of Disbursement POSTAGE	
Candidate Name	Category/Type	Transaction ID : SB17.I8830 [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 08 / 12 / 2015
Mailing Address 475 LENFANT PLZ SW		Amount of Each Disbursement this Period 147.00
City WASHINGTON State DC Zip Code 20260-0001	Purpose of Disbursement POSTAGE	
Candidate Name	Category/Type	Transaction ID : SB17.I8831 [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 70 OF 92			
	<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 09 / 08 / 2015
Mailing Address 2800 NE 125TH STREET		Amount of Each Disbursement this Period 1997.69
City SEATTLE	State WA	
Zip Code 98125-4331	Purpose of Disbursement CREDIT CARD PAYMENT	Transaction ID : SB17.I8692
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. AT&T		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address PO BOX 78522		Amount of Each Disbursement this Period 738.22
City PHOENIX	State AZ	
Zip Code 85062-8522	Purpose of Disbursement PHONE BILL	Transaction ID : SB17.I8761
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. CENTURYLINK		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2015
Mailing Address 100 CENTURYLINK DR		Amount of Each Disbursement this Period 36.41
City MONROE	State LA	
Zip Code 71203	Purpose of Disbursement PHONE SERVICES	Transaction ID : SB17.I8777
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).....	1997.69
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 71 OF 92			
	<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 08 / 19 / 2015
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.I8770 [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. ISSAQUAH MINI-STORAGE		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2015
Mailing Address 6011 E LAKE SAMMAMISH PKWY		Amount of Each Disbursement this Period 235.00
City ISSAQUAH	State WA	
Zip Code 98029	Purpose of Disbursement STORAGE RENT	Transaction ID : SB17.I8792 [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. MAILCHIMP		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2015
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 EMAIL SERVICES	Transaction ID : SB17.I8798 [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 72 OF 92			
	<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. MICROSOFT		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2015
Mailing Address 1 MICROSOFT WAY		Amount of Each Disbursement this Period 26.28
City REDMOND	State WA	
Zip Code 98052	Purpose of Disbursement SOFTWARE	Transaction ID : SB17.I8806
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 08 / 19 / 2015
Mailing Address 575 8TH AVE FL 11		Amount of Each Disbursement this Period 22.78
City NEW YORK	State NY	
Zip Code 10018-3549	Purpose of Disbursement WEBSITE SERVICES	Transaction ID : SB17.I8814
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. HONDA CENTER		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2015
Mailing Address 13291 SE 36TH STREET		Amount of Each Disbursement this Period 497.89
City BELLEVUE	State WA	
Zip Code 98006-1328	Purpose of Disbursement VEHICLE LEASE	Transaction ID : SB17.I8693
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).....	497.89
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 92			
	<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 M M / D D / Y Y Y Y 08 / 07 / 2015
Mailing Address 13291 SE 36TH STREET		Amount of Each Disbursement this Period 497.89 Transaction ID : SB17.I8694
City BELLEVUE State WA Zip Code 98006-1328	Purpose of Disbursement VEHICLE LEASE	
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. HONDA CENTER		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2015
Mailing Address 13291 SE 36TH STREET		Amount of Each Disbursement this Period 497.89 Transaction ID : SB17.I8695
City BELLEVUE State WA Zip Code 98006-1328	Purpose of Disbursement VEHICLE LEASE	
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. ISTREAM FINANCIAL SERVICES		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2015
Mailing Address 13555 BISHOPS COURT #102		Amount of Each Disbursement this Period 35.60 Transaction ID : SB17.I8696
City BROOKFIELD State WI Zip Code 53005	Purpose of Disbursement CHECK PROCESSING FEE	
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).....	1031.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 92			
	<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. ISTREAM FINANCIAL SERVICES		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2015
Mailing Address 13555 BISHOPS COURT #102		Amount of Each Disbursement this Period 40.76
City BROOKFIELD State WI Zip Code 53005	Purpose of Disbursement CHECK PROCESSING FEE	Transaction ID : SB17.I8697
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. ISTREAM FINANCIAL SERVICES		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2015
Mailing Address 13555 BISHOPS COURT #102		Amount of Each Disbursement this Period 46.79
City BROOKFIELD State WI Zip Code 53005	Purpose of Disbursement CHECK PROCESSING FEE	Transaction ID : SB17.I8698
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. KING COUNTY REPUBLICAN PARTY		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2015
Mailing Address 845 106TH AVENUE, #110		Amount of Each Disbursement this Period 250.00
City BELLEVUE State WA Zip Code 98004-4308	Purpose of Disbursement TICKETS TO EVENTS	Transaction ID : SB17.I8699
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).....	337.55
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 75 OF 92			
	<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 / 2015
Mailing Address 10000 NE 7TH AVENUE, STE 402		Amount of Each Disbursement this Period 177.90
City VANCOUVER State WA Zip Code 98685-4548	Purpose of Disbursement PAYROLL PROCESSING FEES	
Candidate Name	Category/Type	Transaction ID : SB17.I8700
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. PAYROLLNW		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2015
Mailing Address 10000 NE 7TH AVENUE, STE 402		Amount of Each Disbursement this Period 1687.86
City VANCOUVER State WA Zip Code 98685-4548	Purpose of Disbursement PAYROLL: SEE MEMO ENTRIES	
Candidate Name	Category/Type	Transaction ID : SB17.I8701
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. BLAKE VINTERTUN		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 12523 NE 128TH WAY H-10		Amount of Each Disbursement this Period 1687.86
City KIRKLAND State WA Zip Code 98034	Purpose of Disbursement SALARY	
Candidate Name	Category/Type	Transaction ID : SB17.I8769 [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).....	1765.76
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 76 OF 92			
	<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 / 2015
Mailing Address 10000 NE 7TH AVENUE, STE 402		Amount of Each Disbursement this Period 679.94 Transaction ID : SB17.I8702
City VANCOUVER State WA Zip Code 98685-4548	Purpose of Disbursement PAYROLL TAX	
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. PAYROLLNW		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2015
Mailing Address 10000 NE 7TH AVENUE, STE 402		Amount of Each Disbursement this Period 77.90 Transaction ID : SB17.I8703
City VANCOUVER State WA Zip Code 98685-4548	Purpose of Disbursement PAYROLL PROCESSING FEES	
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. PAYROLLNW		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2015
Mailing Address 10000 NE 7TH AVENUE, STE 402		Amount of Each Disbursement this Period 1687.86 Transaction ID : SB17.I8704
City VANCOUVER State WA Zip Code 98685-4548	Purpose of Disbursement PAYROLL: SEE MEMO ENTRIES	
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).....	2445.70
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 77 OF 92			
	<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 09 / 14 / 2015	
Mailing Address 12523 NE 128TH WAY H-10			Amount of Each Disbursement this Period 1687.86	
City KIRKLAND	State WA	Zip Code 98034	Transaction ID : SB17.I8768 [MEMO ITEM]	
Purpose of Disbursement SALARY		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. PAYROLLNW			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2015	
Mailing Address 10000 NE 7TH AVENUE, STE 402			Amount of Each Disbursement this Period 679.94	
City VANCOUVER	State WA	Zip Code 98685-4548	Transaction ID : SB17.I8705	
Purpose of Disbursement PAYROLL TAX		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 08 / 13 / 2015	
Mailing Address 10000 NE 7TH AVENUE, STE 402			Amount of Each Disbursement this Period 1687.86	
City VANCOUVER	State WA	Zip Code 98685-4548	Transaction ID : SB17.I8706	
Purpose of Disbursement PAYROLL: SEE MEMO ENTRIES		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).....	2367.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 92			
	<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 08 / 31 / 2015	
Mailing Address 12523 NE 128TH WAY H-10			Amount of Each Disbursement this Period 1687.86	
City KIRKLAND	State WA	Zip Code 98034	Transaction ID : SB17.I8767 [MEMO ITEM]	
Purpose of Disbursement SALARY		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. PAYROLLNW			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2015	
Mailing Address 10000 NE 7TH AVENUE, STE 402			Amount of Each Disbursement this Period 679.94	
City VANCOUVER	State WA	Zip Code 98685-4548	Transaction ID : SB17.I8707	
Purpose of Disbursement PAYROLL TAX		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 08 / 31 / 2015	
Mailing Address 10000 NE 7TH AVENUE, STE 402			Amount of Each Disbursement this Period 679.94	
City VANCOUVER	State WA	Zip Code 98685-4548	Transaction ID : SB17.I8708	
Purpose of Disbursement PAYROLL TAX		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).....	1359.88
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 79 OF 92			
	<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 08 / 31 / 2015
Mailing Address 10000 NE 7TH AVENUE, STE 402		Amount of Each Disbursement this Period 1687.86 Transaction ID : SB17.I8709
City VANCOUVER State WA Zip Code 98685-4548	Purpose of Disbursement PAYROLL: SEE MEMO ENTRIES	
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. BLAKE VINTERTUN		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2015
Mailing Address 12523 NE 128TH WAY H-10		Amount of Each Disbursement this Period 1687.86 Transaction ID : SB17.I8766 [MEMO ITEM]
City KIRKLAND State WA Zip Code 98034	Purpose of Disbursement SALARY	
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. PAYROLLNW		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2015
Mailing Address 10000 NE 7TH AVENUE, STE 402		Amount of Each Disbursement this Period 77.90 Transaction ID : SB17.I8710
City VANCOUVER State WA Zip Code 98685-4548	Purpose of Disbursement PAYROLL PROCESSING FEES	
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).....	1765.76
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 80 OF 92			
	<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 09 / 14 / 2015
Mailing Address 10000 NE 7TH AVENUE, STE 402		Amount of Each Disbursement this Period 679.94 Transaction ID : SB17.I8711
City VANCOUVER State WA Zip Code 98685-4548	Purpose of Disbursement PAYROLL TAX	
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. PAYROLLNW		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 10000 NE 7TH AVENUE, STE 402		Amount of Each Disbursement this Period 1687.86 Transaction ID : SB17.I8712
City VANCOUVER State WA Zip Code 98685-4548	Purpose of Disbursement PAYROLL: SEE MEMO ENTRIES	
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. BLAKE VINTERTUN		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2015
Mailing Address 12523 NE 128TH WAY H-10		Amount of Each Disbursement this Period 1687.86 Transaction ID : SB17.I8765 [MEMO ITEM]
City KIRKLAND State WA Zip Code 98034	Purpose of Disbursement SALARY	
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).....	2367.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 92			
	<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 09 / 17 / 2015
Mailing Address 10000 NE 7TH AVENUE, STE 402		Amount of Each Disbursement this Period 1687.86 Transaction ID : SB17.I8713
City VANCOUVER State WA Zip Code 98685-4548	Purpose of Disbursement PAYROLL PROCESSING FEES	
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. PAYROLLNW		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 10000 NE 7TH AVENUE, STE 402		Amount of Each Disbursement this Period 1687.86 Transaction ID : SB17.I8714
City VANCOUVER State WA Zip Code 98685-4548	Purpose of Disbursement PAYROLL: SEE MEMO ENTRIES	
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. BLAKE VINTERTUN		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2015
Mailing Address 12523 NE 128TH WAY H-10		Amount of Each Disbursement this Period 1687.86 Transaction ID : SB17.I8764
City KIRKLAND State WA Zip Code 98034	Purpose of Disbursement SALARY	
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).....	1766.81
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 92			
	<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
Mailing Address 10000 NE 7TH AVENUE, STE 402		M M / D D / Y Y Y Y 09 / 30 / 2015
City VANCOUVER	State WA	Zip Code 98685-4548
Purpose of Disbursement PAYROLL TAX	Amount of Each Disbursement this Period 679.94	
Candidate Name	Transaction ID : SB17.I8715	
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. PROGRESSIVE INSURANCE		Date of Disbursement
Mailing Address P.O. BOX 105428		M M / D D / Y Y Y Y 07 / 01 / 2015
City ATLANTA	State GA	Zip Code 30348-5428
Purpose of Disbursement INSURANCE	Amount of Each Disbursement this Period 207.40	
Candidate Name	Transaction ID : SB17.I8716	
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. PROGRESSIVE INSURANCE		Date of Disbursement
Mailing Address P.O. BOX 105428		M M / D D / Y Y Y Y 07 / 30 / 2015
City ATLANTA	State GA	Zip Code 30348-5428
Purpose of Disbursement INSURANCE	Amount of Each Disbursement this Period 207.40	
Candidate Name	Transaction ID : SB17.I8717	
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).....	1094.74
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 83 OF 92
	<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		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2015
Mailing Address P.O. BOX 105428		Amount of Each Disbursement this Period 207.40 Transaction ID : SB17.I8718
City ATLANTA State GA Zip Code 30348-5428	Purpose of Disbursement INSURANCE	
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. PROGRESSIVE INSURANCE		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address P.O. BOX 105428		Amount of Each Disbursement this Period 207.40 Transaction ID : SB17.I8719
City ATLANTA State GA Zip Code 30348-5428	Purpose of Disbursement INSURANCE	
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. SERMO DIGITAL		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2015
Mailing Address 7605 SE 27TH STREET		Amount of Each Disbursement this Period 463.18 Transaction ID : SB17.I8720
City MERCER ISLAND State WA Zip Code 98040	Purpose of Disbursement ONLINE SERVICES	
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).....	877.98
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 84 OF 92			
	<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. SERMO DIGITAL		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2015
Mailing Address 7605 SE 27TH STREET		Amount of Each Disbursement this Period 2287.56
City MERCER ISLAND	State WA	
Zip Code 98040	Purpose of Disbursement ONLINE SERVICES	Transaction ID : SB17.I8721
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. SERMO DIGITAL		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2015
Mailing Address 7605 SE 27TH STREET		Amount of Each Disbursement this Period 75.00
City MERCER ISLAND	State WA	
Zip Code 98040	Purpose of Disbursement ONLINE SERVICES	Transaction ID : SB17.I8722
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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2015
Mailing Address 3180 18TH ST STE 100		Amount of Each Disbursement this Period 29.60
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CREDIT CARD PROCESSING FEES	Transaction ID : SB17.I8723
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).....	2392.16
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 85 OF 92		
	<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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2015
Mailing Address 3180 18TH ST STE 100		Amount of Each Disbursement this Period 94.85 Transaction ID : SB17.I8724
City SAN FRANCISCO State CA Zip Code 94110	Purpose of Disbursement CREDIT CARD PROCESSING FEES	
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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2015
Mailing Address 3180 18TH ST STE 100		Amount of Each Disbursement this Period 7.55 Transaction ID : SB17.I8725
City SAN FRANCISCO State CA Zip Code 94110	Purpose of Disbursement CREDIT CARD PROCESSING FEES	
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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 3180 18TH ST STE 100		Amount of Each Disbursement this Period 156.90 Transaction ID : SB17.I8726
City SAN FRANCISCO State CA Zip Code 94110	Purpose of Disbursement CREDIT CARD PROCESSING FEES	
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).....	259.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 92		
	<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. STRIPE

Mailing Address 3180 18TH ST STE 100

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 29 / 2015

Amount of Each Disbursement this Period
4.95

Transaction ID : SB17.I8727

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

Mailing Address 3180 18TH ST STE 100

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Disbursement this Period
29.30

Transaction ID : SB17.I8728

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

Mailing Address 3180 18TH ST STE 100

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Disbursement this Period
0.59

Transaction ID : SB17.I8729

SUBTOTAL of Disbursements This Page (optional)..... 34.84

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 87 OF 92		
	<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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2015
Mailing Address 3180 18TH ST STE 100		Amount of Each Disbursement this Period 0.45 Transaction ID : SB17.I8730
City SAN FRANCISCO	State CA	
Zip Code 94110	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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2015
Mailing Address 3180 18TH ST STE 100		Amount of Each Disbursement this Period 13.80 Transaction ID : SB17.I8731
City SAN FRANCISCO	State CA	
Zip Code 94110	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) C. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2015
Mailing Address 3180 18TH ST STE 100		Amount of Each Disbursement this Period 19.26 Transaction ID : SB17.I8732
City SAN FRANCISCO	State CA	
Zip Code 94110	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:	

SUBTOTAL of Disbursements This Page (optional).....	33.51
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 88 OF 92		
	<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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2015
Mailing Address 3180 18TH ST STE 100		Amount of Each Disbursement this Period 9,999,999.99 4.97
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CREDIT CARD PROCESSING FEES	Transaction ID : SB17.I8733
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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2015
Mailing Address 3180 18TH ST STE 100		Amount of Each Disbursement this Period 9,999,999.99 7.38
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CREDIT CARD PROCESSING FEES	Transaction ID : SB17.I8734
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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2015
Mailing Address 3180 18TH ST STE 100		Amount of Each Disbursement this Period 9,999,999.99 1.18
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CREDIT CARD PROCESSING FEES	Transaction ID : SB17.I8735
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).....	9,999,999.99 13.53
TOTAL This Period (last page this line number only).....	9,999,999.99

**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 89 OF 92		
	<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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2015
Mailing Address 3180 18TH ST STE 100		Amount of Each Disbursement this Period 0.98 Transaction ID : SB17.I8736
City SAN FRANCISCO	State CA	
Zip Code 94110	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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015
Mailing Address 3180 18TH ST STE 100		Amount of Each Disbursement this Period 3.68 Transaction ID : SB17.I8737
City SAN FRANCISCO	State CA	
Zip Code 94110	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) C. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2015
Mailing Address 3180 18TH ST STE 100		Amount of Each Disbursement this Period 1.75 Transaction ID : SB17.I8738
City SAN FRANCISCO	State CA	
Zip Code 94110	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:	

SUBTOTAL of Disbursements This Page (optional).....	6.41
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 90 OF 92			
	<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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2015
Mailing Address 3180 18TH ST STE 100		Amount of Each Disbursement this Period 1.03 Transaction ID : SB17.I8739
City SAN FRANCISCO	State CA	
Zip Code 94110	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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 3180 18TH ST STE 100		Amount of Each Disbursement this Period 21.10 Transaction ID : SB17.I8740
City SAN FRANCISCO	State CA	
Zip Code 94110	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) C. THE CATALYST GROUP		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 600 PENNSYLVANIA AVE SE STE 330		Amount of Each Disbursement this Period 1447.17 Transaction ID : SB17.I8741
City WASHINGTON	State DC	
Zip Code 20003-6300	Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1469.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 92			
	<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 CATALYST GROUP			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2015
Mailing Address 600 PENNSYLVANIA AVE SE STE 330			Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.I8742
City WASHINGTON	State DC	Zip Code 20003-6300	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <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 / 08 / 2015
Mailing Address 600 PENNSYLVANIA AVE SE STE 330			Amount of Each Disbursement this Period 1263.21 Transaction ID : SB17.I8743
City WASHINGTON	State DC	Zip Code 20003-6300	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <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 08 / 07 / 2015
Mailing Address 600 PENNSYLVANIA AVE SE STE 330			Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.I8744
City WASHINGTON	State DC	Zip Code 20003-6300	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	9263.21
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 92
	<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 CATALYST GROUP		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2015
Mailing Address 600 PENNSYLVANIA AVE SE STE 330		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.I8745
City WASHINGTON State DC Zip Code 20003-6300	Purpose of Disbursement FUNDRAISING CONSULTING	
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. THE VOYAGEUR COMPANY		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2015
Mailing Address 100 EYE STREET SE #1108		Amount of Each Disbursement this Period 4459.44 Transaction ID : SB17.I8746
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement DIRECT MAIL	
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. WASHINGTON STATE REPUBLICAN PARTY		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2015
Mailing Address 2840 NORTHUP WAY STE 140		Amount of Each Disbursement this Period 41000.00 Transaction ID : SB17.I8748
City BELLEVUE State WA Zip Code 98004-1433	Purpose of Disbursement CONTRIBUTION TO COMMITTEE	
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).....	49459.44
TOTAL This Period (last page this line number only).....	96645.31