



**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 94

Write or Type Committee Name

**Friends of Dave Reichert**

Report Covering the Period: From:

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 01  |   | 2013    |

To:

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 31  |   | 2013    |

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)   |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....   | 114655.89               | 536284.83                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....   | 500.00                  | 1350.00                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                            | 114155.89               | 534934.83                          |
| 7. Net Operating Expenditures   |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....  | 59390.49                | 316685.45                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 0.00                    | 2394.65                            |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....                                      | 59390.49                | 314290.80                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....   | 354743.36               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | 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:  /  /

| <b>I. RECEIPTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Election Cycle-to-Date</b> |
|--|---------------------------------------|--|
| <b>11. CONTRIBUTIONS (other than loans) FROM:</b>  |                                       |  |
| (a) Individuals/Persons Other Than Political Committees  |                                       |  |
| (i) Itemized (use Schedule A).....   | 49950.00                              | 213739.56                                  |
| (ii) Unitemized.....   | 6765.00                               | 27754.38                                   |
| (iii) TOTAL of contributions from individuals ▶  | 56715.00                              | 241493.94                                  |
| (b) Political Party Committees.....  | 0.00                                  | 0.00                                       |
| (c) Other Political Committees (such as PACs).....   | 57940.89                              | 294790.89                                  |
| (d) The Candidate.....   | 0.00                                  | 0.00                                       |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..                     | 114655.89                             | 536284.83                                  |
| <b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>  | 0.00                                  | 0.00                                       |
| <b>13. LOANS:</b>  |                                       |  |
| (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                                       |
| <b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>                                | 0.00                                  | 2394.65                                    |
| <b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>   | 1500.00                               | 1500.00                                    |
| <b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b> | 116155.89                             | 540179.48                                  |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 59390.49                      | 316685.45                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 350.00                             |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs).....                        | 500.00                        | 1000.00                            |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 500.00                        | 1350.00                            |
| 21. OTHER DISBURSEMENTS .....  | 5000.00                       | 40525.00                           |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 64890.49                      | 358560.45                          |

**III. CASH SUMMARY**

|   |           |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 303477.96 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 116155.89 |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 419633.85 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 64890.49  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 354743.36 |

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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**

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>RICHARD A. BLACK</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>11 / 27 / 2013 |
| Mailing Address 1505 DANA WOOD  |                                   | <b>Transaction ID : SA11.34309</b>                       |
| City<br>WENATCHEE   | State<br>WA                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2500.00            |
| Name of Employer<br>NONE  | Occupation<br>RETIRED             | CONTRIBUTION   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2500.00 |  |

|   |                                  |  |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>JOHN BOGGS</b>  |                                  | Date of Receipt<br>M M / D D / Y Y Y Y<br>11 / 01 / 2013 |
| Mailing Address 3900 RALLWAY AVE  |                                  | <b>Transaction ID : SA11.34247</b>                       |
| City<br>EVERETT   | State<br>WA                      |  |
| FEC ID number of contributing federal political committee.<br>C   |                                  | Amount of Each Receipt this Period<br>500.00             |
| Name of Employer<br>DEEP SEA FISHERIES  | Occupation<br>PRESIDENT          | CONTRIBUTION   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>500.00 |  |

|   |                                   |  |
|---|-----------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>ANDRIA BOYLE</b>  |                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>12 / 31 / 2013 |
| Mailing Address 430 H STREET RD   |                                   | <b>Transaction ID : SA11.34395</b>                       |
| City<br>LYNDEN  | State<br>WA                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                   | Amount of Each Receipt this Period<br>2400.00            |
| Name of Employer<br>NONE  | Occupation<br>HOMEMAKER           | CONTRIBUTION   |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>2400.00 |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 5400.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |              |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 6 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |              |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**GERRIT BOYLE**

Mailing Address 430 H STREET RD

City LYNDEN State WA Zip Code 98264-8405

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

Name of Employer ALASKA STRUCTURES Occupation SALES

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : SA11.34394**

Amount of Each Receipt this Period  
 2400.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SUZANNE M. BURKE**

Mailing Address 7542 34TH NW

City SEATTLE State WA Zip Code 98117-4723

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

Name of Employer FREMONT DOCK Occupation PROJECT MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 23 / 2013

**Transaction ID : SA11.34342**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address 1326 5TH AVE #708

City SEATTLE State WA Zip Code 98101-2604

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

Name of Employer SELF EMPLOYED Occupation REAL ESTATE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 15 / 2013

**Transaction ID : SA11.34253**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

3400.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**LOWELL CANTRELL**

Mailing Address 29727 49TH PL S

City AUBURN State WA Zip Code 98001-1508

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

Name of Employer METIER CONSTRUCTION, INC. Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 18 / 2013

**Transaction ID : SA11.34362**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM J. COWLES**

Mailing Address 9487 ANDERSON CYN. RD.

City PESHASTIN State WA Zip Code 98847-9541

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 26 / 2013

**Transaction ID : SA11.34270**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**C.** 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 EMPLOYED Occupation FARMER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 17 / 2013

**Transaction ID : SA11.34196**

Amount of Each Receipt this Period  
 50.00

CONTRIBUTION

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

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

2650.00

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 8 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**THOMAS ECKHART**

Mailing Address 10612 NE 46TH ST

City KIRKLAND State WA Zip Code 98033-7611

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

Name of Employer UCONS LLC Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2013

**Transaction ID : SA11.34242**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**KIMBERLY ELLIS**

Mailing Address 5829 21ST ST N

City ARLINGTON State VA Zip Code 22205-3309

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

Name of Employer MONUMENT POLICY GROUP Occupation VP GOVERNMENT RELATIONS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : SA11.34358**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

Mailing Address 9345 FAUNTLEROY WAY SW

City SEATTLE State WA Zip Code 98136-2685

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

Name of Employer SALTCHUK RESOURCES INC Occupation PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2013

**Transaction ID : SA11.34230**

Amount of Each Receipt this Period  
**500.00**  
 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 9 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**HEIDI ERIKSEN**

Mailing Address **2416 NE NEPTUNE PL**

City **SEATTLE** State **WA** Zip Code **98117-2535**

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

Name of Employer **ALEUTIAN SPRAY FISHERIES INC** Occupation **MARKETING**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 01 / 2013**

**Transaction ID : SA11.34225**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

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

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 / 03 / 2013**

**Transaction ID : SA11.34317**

Amount of Each Receipt this Period  
**1750.00**  
 CONTRIBUTION

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

Mailing Address **825 NW MARKET STREET**

City **SEATTLE** State **WA** Zip Code **98107-3650**

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

Name of Employer **SELF EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 / 03 / 2013**

**Transaction ID : SA11.34318**

Amount of Each Receipt this Period  
**100.00**  
 CONTRIBUTION

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

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

**2350.00**

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**JOYCE GARLAND**

Mailing Address 605 E LAKE SAMMAMISH LANE 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: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : SA11.34365**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JIM GILMORE**

Mailing Address 5034 36TH AVE NE

City SEATTLE State WA Zip Code 98105-3145

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

Name of Employer AT-SEA PROCESSORS ASSOCIATION Occupation PUBLIC AFFAIRS DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2013

**Transaction ID : SA11.34224**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

Mailing Address PO BOX 1240

City CARNATION State WA Zip Code 98014-1240

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2013

**Transaction ID : SA11.34180**

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:<br>(check only one)   | PAGE 11 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**MICHAEL O. HAMBELTON**

Mailing Address 148 HEATHER LN

City WENATCHEE State WA Zip Code 98801-9644

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 13 / 2013

**Transaction ID : SA11.34188**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JOHN HARNISH**

Mailing Address 500 106TH AVE NE UNIT 4105

City BELLEVUE State WA Zip Code 98004-8695

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

Name of Employer HARNISH GROUP, INC. Occupation MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : SA11.34375**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD M. HOFFMANN**

Mailing Address 4065 W EAGLEROCK DR.

City WENATCHEE State WA Zip Code 98801-9072

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : SA11.34335**

Amount of Each Receipt this Period  
 500.00  
 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 12 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**PATRICK M. KELLY**

Mailing Address 4345 32ND AVE W APT 406

City State Zip Code  
SEATTLE WA 98199-1338

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 27 / 2013

**Transaction ID : SA11.34298**

Amount of Each Receipt this Period  
100.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**TERI LINDLEY**

Mailing Address 5526 154TH AVE SE

City State Zip Code  
BELLEVUE WA 98006-5350

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 20 / 2013

**Transaction ID : SA11.34367**

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

Mailing Address 8580 HUNTS POINT LANE

City State Zip Code  
BELLEVUE WA 98004-1101

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 30 / 2013

**Transaction ID : SA11.34212**

Amount of Each Receipt this Period  
2100.00  
CONTRIBUTION

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

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

2450.00

**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 13 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RUFUS LUMRY**

Mailing Address 8580 HUNTS POINT LANE

City State Zip Code  
BELLEVUE WA 98004-1101

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

Name of Employer Occupation  
ACORN VENTURES PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 30 / 2013

**Transaction ID : SA11.34213**

Amount of Each Receipt this Period  
2100.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**STEPHANIE D. MADSEN**

Mailing Address 10652 PORTER LANE

City State Zip Code  
JUNEAU AK 99801-8517

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

Name of Employer Occupation  
PACIFIC SEAFOOD PROCESSORS MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 01 / 2013

**Transaction ID : SA11.34220**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address 4028 41ST AVE S

City State Zip Code  
SEATTLE WA 98118-1115

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 31 / 2013

**Transaction ID : SA11.34347**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

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

3100.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**MICHAEL MCDEVITT**

Mailing Address **27801 187TH AVE SE**

City **KENT** State **WA** Zip Code **98042-5459**

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

Name of Employer **HUSKY INTERNATIONAL TRUCKS** Occupation **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 13 / 2013**

**Transaction ID : SA11.34187**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HARRY MCDONALD**

Mailing Address **6640 JOLLIPAN COURT**

City **ANCHORAGE** State **AK** Zip Code **99507-6736**

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

Name of Employer **CARLILE TRANSPORTATION SYSTEMS INC** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 05 / 2013**

**Transaction ID : SA11.34235**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

Mailing Address **18816 SE 42ND ST**

City **ISAQUAH** 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: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 / 31 / 2013**

**Transaction ID : SA11.34345**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**2250.00**

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 15 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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 D. MCNAIR**

Mailing Address 2085 NE NATALIE WAY

City ISSAQUAH State WA Zip Code 98029-3668

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

Name of Employer AMERICAN SEAFOODS GROUP LLC Occupation EXECUTIVE VP OF FINANCE AND BUSINES:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2013

**Transaction ID : SA11.34219**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NANCY MEYERS**

Mailing Address 2717 200TH AVE SE

City SAMMAMISH State WA Zip Code 98075-7467

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

Name of Employer BE MEYERS Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2013

**Transaction ID : SA11.34172**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**HUGO E. OSWALD JR.**

Mailing Address 2430 76TH AVE SE APT 619

City MERCER ISLAND State WA Zip Code 98040-3363

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 27 / 2013

**Transaction ID : SA11.34304**

Amount of Each Receipt this Period  
150.00

CONTRIBUTION

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

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

1150.00

**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 16 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |                                    |  |  |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>ANNETTE PARKS</b>   |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>12 / 20 / 2013   |  |
| Mailing Address 2125 1ST AVE APT 2603   |                                    | <b>Transaction ID : SA11.34363</b>                           |  |
| City<br>SEATTLE   | State<br>WA                        | Zip Code<br>98121-2121                                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                    | Amount of Each Receipt this Period<br>250.00<br>CONTRIBUTION |  |
| Name of Employer<br>SELF EMPLOYED   | Occupation<br>REAL ESTATE INVESTOR |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>1250.00  |  |  |

|   |                                       |  |  |
|---|---------------------------------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>ROBERT PARKS</b>  |                                       | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>12 / 20 / 2013   |  |
| Mailing Address 2125 1ST AVE APT 2603   |                                       | <b>Transaction ID : SA11.34364</b>                           |  |
| City<br>SEATTLE   | State<br>WA                           | Zip Code<br>98121-2121                                       |  |
| FEC ID number of contributing federal political committee.<br>C   |                                       | Amount of Each Receipt this Period<br>250.00<br>CONTRIBUTION |  |
| Name of Employer<br>TRF PACIFIC LLC   | Occupation<br>REAL ESTATE DEVELOPMENT |  |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>250.00      |  |  |

|   |                                     |   |  |
|---|-------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>EVERETT PAUP</b>  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>12 / 11 / 2013    |  |
| Mailing Address 6964 WING POINT RD NE   |                                     | <b>Transaction ID : SA11.34336</b>                            |  |
| City<br>BAINBRIDGE ISLAND   | State<br>WA                         | Zip Code<br>98110-2986  |  |
| FEC ID number of contributing federal political committee.<br>C   |                                     | Amount of Each Receipt this Period<br>2600.00<br>CONTRIBUTION |  |
| Name of Employer<br>MANSON CONSTRUCTION   | Occupation<br>CHARIMAN OF THE BOARD |   |  |
| Receipt For: 2014<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Election Cycle-to-Date<br>5200.00   |   |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 3100.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | _____   |



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

|   |   |               |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 17 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**EVERETT PAUP**

Mailing Address **6964 WING POINT RD NE**

City **BAINBRIDGE ISLAND** State **WA** Zip Code **98110-2986**

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

Name of Employer **MANSON CONSTRUCTION** Occupation **CHARIMAN OF THE BOARD**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 / 11 / 2013**

**Transaction ID : SA11.34397**

Amount of Each Receipt this Period  
**600.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WALTER PEREYRA**

Mailing Address **148 E LAKE SAMMAMISH PKWY SE**

City **SAMMAMISH** State **WA** Zip Code **98074-3811**

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

Name of Employer **ASMG** Occupation **CHAIRMAN**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 01 / 2013**

**Transaction ID : SA11.34215**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

Mailing Address **3717 45TH AVE NE**

City **TACOMA** State **WA** Zip Code **98422-2456**

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

Name of Employer **GROUP HEALTH COOPERATIVE** Occupation **PROJECT MANAGER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 27 / 2013**

**Transaction ID : SA11.34281**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**1350.00**

**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 18 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |               |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |             |  |  |
|---|-------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>DENNIS PHELAN</b>   |             | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>11 / 01 / 2013 |  |
| Mailing Address 5849 ASPENWOOD CT   |             | <b>Transaction ID : SA11.34217</b>                         |  |
| City<br>MC LEAN   | State<br>VA | Zip Code<br>22101-2501                                     |  |
| FEC ID number of contributing federal political committee.<br>C   |             | Amount of Each Receipt this Period<br>500.00               |  |
| Name of Employer<br>PACIFIC SEAFOOD PROCESSOR ASSN  |             | Occupation<br>MANAGER                                      |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |             | Election Cycle-to-Date<br>500.00                           |  |

|   |             |  |  |
|---|-------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>JOSEPH T. PLESHA III</b>  |             | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>11 / 01 / 2013 |  |
| Mailing Address 5010 NE 180TH ST  |             | <b>Transaction ID : SA11.34216</b>                         |  |
| City<br>LAKE FOREST PARK  | State<br>WA | Zip Code<br>98155-4327                                     |  |
| FEC ID number of contributing federal political committee.<br>C   |             | Amount of Each Receipt this Period<br>500.00               |  |
| Name of Employer<br>TRIDENT SEAFOODS CORP.  |             | Occupation<br>GENERAL COUNSEL                              |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |             | Election Cycle-to-Date<br>500.00                           |  |

|   |             |  |  |
|---|-------------|--|--|
| Full Name (Last, First, Middle Initial)<br><b>JAMES F. RIGBY JR.</b>  |             | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>11 / 27 / 2013 |  |
| Mailing Address 10301 45TH AVE NE   |             | <b>Transaction ID : SA11.34297</b>                         |  |
| City<br>SEATTLE   | State<br>WA | Zip Code<br>98125-8121                                     |  |
| FEC ID number of contributing federal political committee.<br>C   |             | Amount of Each Receipt this Period<br>1000.00              |  |
| Name of Employer<br>SELF EMPLOYED   |             | Occupation<br>ATTORNEY                                     |  |
| Receipt For: 2014<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |             | Election Cycle-to-Date<br>2000.00                          |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 2000.00 |
| <b>TOTAL</b> 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:<br>(check only one)   | PAGE 19 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**MARY ROBERTSON**

Mailing Address 99 UNION ST., UNIT 1402

City SEATTLE State WA Zip Code 98101-5007

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : SA11.34320**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HERMAN SARKOWSKY**

Mailing Address 1201 3RD AVE STE 5450

City SEATTLE State WA Zip Code 98101-3018

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

Name of Employer SELF EMPLOYED Occupation INVESTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : SA11.34332**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

Mailing Address 411 W SMITH ST

City SEATTLE State WA Zip Code 98119-2324

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

Name of Employer FREEZER LONGLINE COALITION Occupation EXECUTIVE DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 01 / 2013

**Transaction ID : SA11.34248**

Amount of Each Receipt this Period  
**500.00**  
 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: (check only one)   | PAGE 20 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**TERRY SHAFF**

Mailing Address

City State Zip Code  
KIRKLAND WA 98033-

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

Name of Employer Occupation  
UNISEA INC PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 01 / 2013

**Transaction ID : SA11.34223**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL SHELFORD**

Mailing Address 15425 3RD DR SE

City State Zip Code  
BOTHELL WA 98012-4505

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

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

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 01 / 2013

**Transaction ID : SA11.34221**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

Mailing Address 4600 FOREST AVE SE

City State Zip Code  
MERCER ISLAND WA 98040-4307

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 13 / 2013

**Transaction ID : SA11.34186**

Amount of Each Receipt this Period  
450.00  
CONTRIBUTION

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

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

1450.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>14 <input type="checkbox"/> 11e<br>15 |               |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A.** Full Name (Last, First, Middle Initial)  
**KEN THURMAN**

Mailing Address 106 8TH LANE

City State Zip Code  
KIRKLAND WA 98033-6339

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

Name of Employer Occupation  
SELF EMPLOYED REAL ESTATE INVESTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 23 / 2013

**Transaction ID : SA11.34344**

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**FRED L. TREXLER**

Mailing Address 4544 7TH AVE NE, APT 908

City State Zip Code  
SEATTLE WA 98105-4735

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

Name of Employer Occupation  
SELF EMPLOYED WRITER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 27 / 2013

**Transaction ID : SA11.34285**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

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

Mailing Address 6705 BEACH DR SW

City State Zip Code  
SEATTLE WA 98136-1760

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

Name of Employer Occupation  
SALTCHUK CHAIRMAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 05 / 2013

**Transaction ID : SA11.34239**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

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

3150.00

**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 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**MATT UPTON**

Mailing Address 15166 SKOSEN LANE

City State Zip Code  
BAINBRIDGE ISLAND WA 98110-3057

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

Name of Employer Occupation  
US SEA FOODS ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 03 / 2013

**Transaction ID : SA11.34314**

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JEAN D. VELDWYK**

Mailing Address 5504 RAINIER AVE S

City State Zip Code  
SEATTLE WA 98118-2441

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

Name of Employer Occupation  
SELF EMPLOYED REAL ESTATE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 09 / 2013

**Transaction ID : SA11.34173**

Amount of Each Receipt this Period  
200.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AK-CHIN INDIAN COMMUNITY**

Mailing Address 42507 WEST PETERS & NAIL RD

City State Zip Code  
MARICOPA AZ 85138-3940

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 31 / 2013

**Transaction ID : SA11.34386**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

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

1700.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 23 OF 94 |
|   | <input checked="" type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**MICCOSUKEE TRIBE**

Mailing Address **PO BOX 440021**  
**TAMIAMI STATION**

City **MIAMI** State **FL** Zip Code **33144-0021**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 11 / 2013

**Transaction ID : SA11.34353**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PECHANGA BAND OF LUISENO INDIANS**

Mailing Address **PO BOX 1477**

City **TEMECULA** State **CA** Zip Code **92593-1477**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : SA11.34392**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2600.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**POARCH BAND OF CREEK INDIANS**

Mailing Address **5811 JACK SPRINGS ROAD**

City **ATMORE** State **AL** Zip Code **36502-5025**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 11 / 2013

**Transaction ID : SA11.34354**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2600.00

CONTRIBUTION

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

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

\_\_\_\_\_ 7200.00

\_\_\_\_\_ 49950.00

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 24 OF 94 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**ABBOTT LABORATORIES EMPLOYEE PAC**

Mailing Address 100 ABBOTT PARK RD

City NORTH CHICAGO State IL Zip Code 60064-3502

FEC ID number of contributing federal political committee. **C** C00040279

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : SA11.34359**

Amount of Each Receipt this Period  
 2000.00

CONTRIBUTION

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

Mailing Address 1932 WYNNTON RD

City COLUMBUS State GA Zip Code 31999-0001

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : SA11.34371**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

Mailing Address 126 C ST NW

City WASHINGTON State DC Zip Code 20001-2118

FEC ID number of contributing federal political committee. **C** C00360354

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : SA11.34378**

Amount of Each Receipt this Period  
 1000.00

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 25 OF 94  
(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)  
**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: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 27 / 2013

**Transaction ID : SA11.34299**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

CONTRIBUTION

**B.** 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: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : SA11.34370**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN OPTOMETRIC ASSOC. PAC**

Mailing Address 1505 PRINCE ST STE 300

City ALEXANDRIA State VA Zip Code 22314-2874

FEC ID number of contributing federal political committee. **C C00024968**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 23 / 2013

**Transaction ID : SA11.34373**

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:<br>(check only one)   | PAGE 26 OF 94 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : SA11.34360**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AT&T INC. FEDERAL PAC**

Mailing Address 208 S AKARD STREET SUITE 2701

City DALLAS State TX Zip Code 75202-4206

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : SA11.34352**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

Mailing Address PO BOX 961039

City FORT WORTH State TX Zip Code 76161-0039

FEC ID number of contributing federal political committee. **C** C00235739

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2013

**Transaction ID : SA11.34211**

Amount of Each Receipt this Period  
 2500.00  
 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 27 OF 94 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**BP NORTH AMERICA EMPLOYEE PAC**

Mailing Address 501 WESTLAKE PARK BLVD

City HOUSTON State TX Zip Code 77079-2604

FEC ID number of contributing federal political committee. **C** C00060103

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 09 / 2013

**Transaction ID : SA11.34351**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**B.** 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: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 24 / 2013

**Transaction ID : SA11.34206**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BURNS AND MCDONNELL, INC. PAC**

Mailing Address 9400 WARD PKWY

City KANSAS CITY State MO Zip Code 64114-3319

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 06 / 2013

**Transaction ID : SA11.34245**

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:<br>(check only one)   | PAGE 28 OF 94 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**CH2M HILL COMPANIES PAC**

Mailing Address 9191 S JAMAICA ST

City State Zip Code  
ENGLEWOOD CO 80112-5946

FEC ID number of contributing federal political committee. **C** C00143305

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 31 2013

**Transaction ID : SA11.34384**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GARNEY HOLDING CO PAC**

Mailing Address 1333 NW VIVION RD

City State Zip Code  
KANSAS CITY MO 64118-4554

FEC ID number of contributing federal political committee. **C** C00442905

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 06 2013

**Transaction ID : SA11.34246**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**GUARDIAN LIFE FEDERAL PAC**

Mailing Address 7 HANOVER SQUARE

City State Zip Code  
NEW YORK NY 10004-

FEC ID number of contributing federal political committee. **C** C00173393

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 16 2013

**Transaction ID : SA11.34361**

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 29 OF 94 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**HARTFORD ADVOCATES FUND**

Mailing Address 690 ASYLUM AVE

City HARTFORD State CT Zip Code 06115-

FEC ID number of contributing federal political committee. **C C00168864**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : SA11.34385**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HONEYWELL INTERNATIONAL PAC**

Mailing Address 101 CONSTITUTION AVE NW STE 500W

City WASHINGTON State DC Zip Code 20001-2177

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : SA11.34382**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

Mailing Address 101 CONSTITUTION AVE NW STE 500W

City WASHINGTON State DC Zip Code 20001-2177

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : SA11.34383**

Amount of Each Receipt this Period  
 1440.89

CONTRIBUTION

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

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

3440.89

**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 94 |
|   | <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 OPERATING ENGINEERS PAC**

Mailing Address 1125 SEVENTEENTH ST NW

City WASHINGTON State DC Zip Code 20036-4709

FEC ID number of contributing federal political committee. **C C00029504**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2013

**Transaction ID : SA11.34210**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

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

Mailing Address 1750 NEW YORK AVE NW

City WASHINGTON State DC Zip Code 20006-5305

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : SA11.34387**

Amount of Each Receipt this Period  
 1500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**INTL COUNCIL OF SHOPPING CENTERS INC PAC**

Mailing Address 1399 NEW YORK AVE NW STE 720

City WASHINGTON State DC Zip Code 20005-4778

FEC ID number of contributing federal political committee. **C C00217638**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : SA11.34390**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

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

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

6500.00

**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 94 |
|   | <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)  
**LIBERTY MUTUAL INSURANCE CO. PAC**

Mailing Address 175 BERKELEY ST

City State Zip Code  
BOSTON MA 02116-5066

FEC ID number of contributing federal political committee. **C C00171843**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 13 / 2013

**Transaction ID : SA11.34191**

Amount of Each Receipt this Period  
2500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN EMPLOYEES PAC**

Mailing Address 1550 CRYSTAL DR STE 300

City State Zip Code  
ARLINGTON VA 22202-4110

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 09 / 2013

**Transaction ID : SA11.34175**

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

Mailing Address 16011 NE 36TH WAY

City State Zip Code  
REDMOND WA 98052-6301

FEC ID number of contributing federal political committee. **C C00227546**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 20 / 2013

**Transaction ID : SA11.34369**

Amount of Each Receipt this Period  
3500.00  
CONTRIBUTION

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

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

7000.00

**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 94 |
|   | <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)  
**MOTOROLA SOLUTIONS, INC. PAC**

Mailing Address 1455 PENNSYLVANIA AVE NW STE 900

City WASHINGTON State DC Zip Code 20004-1016

FEC ID number of contributing federal political committee. **C C00075341**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 27 / 2013

**Transaction ID : SA11.34296**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS PAC**

Mailing Address 1875 1 STREET NW SUITE 600

City WASHINGTON State DC Zip Code 20006-

FEC ID number of contributing federal political committee. **C C00303339**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : SA11.34350**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOC OF INS & FIN ADVISORS PAC**

Mailing Address 2901 TELESTAR CT

City FALLS CHURCH State VA Zip Code 22042-1260

FEC ID number of contributing federal political committee. **C C00005249**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 23 / 2013

**Transaction ID : SA11.34372**

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 33 OF 94 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**NEA FUND FOR CHILDREN & EDUCATION PAC**

Mailing Address 1201 16TH ST NW STE 420

City WASHINGTON State DC Zip Code 20036-3201

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : SA11.34388**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

Mailing Address 317 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002-5769

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 27 / 2013

**Transaction ID : SA11.34295**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

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

Mailing Address 1900 W EMERSON PL STE 205

City SEATTLE State WA Zip Code 98119-1649

FEC ID number of contributing federal political committee. **C C00193672**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 01 / 2013

**Transaction ID : SA11.34218**

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 34 OF 94 |
|   | <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. PHILIPS ELECTRONICS NORTH AMERICA PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1050 K ST NW STE 900

City WASHINGTON State DC Zip Code 20001-4460

FEC ID number of contributing federal political committee. **C C00239780**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2013

**Transaction ID : SA11.34240**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B. PUGET SOUND ENERGY PAC (PSE PAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 90608

City BELLEVUE State WA Zip Code 98009-

FEC ID number of contributing federal political committee. **C C00101592**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2013

**Transaction ID : SA11.34204**

Amount of Each Receipt this Period  
 2000.00  
 CONTRIBUTION

**C. SALTCHUK RESOURCES INC. PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1000 POTOMAC ST NW STE 500

City WASHINGTON State DC Zip Code 20007-3552

FEC ID number of contributing federal political committee. **C C00411694**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : SA11.34348**

Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

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

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

5500.00

**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 35 OF 94 |
|   | <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 BOEING CO. PAC**

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209-2300

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 9000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2013

**Transaction ID : SA11.34356**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**THE DOCTORS COMPANY FEDERAL PAC**

Mailing Address 185 GREENWOOD RD

City NAPA State CA Zip Code 94558-6270

FEC ID number of contributing federal political committee. **C** C00300376

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : SA11.34389**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**C.** 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: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 03 / 2013

**Transaction ID : SA11.34349**

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 36 OF 94 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input checked="" type="checkbox"/> 11c<br>13b <input type="checkbox"/> 11d<br>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)  
**UNION PACIFIC CORP. FUND EFFECTIVE GOVT.**

Mailing Address 600 13TH ST NW STE 340

City WASHINGTON State DC Zip Code 20005-3012

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 27 / 2013

**Transaction ID : SA11.34287**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**UNITED CATCHER BOATS PAC**

Mailing Address 4005 20TH AVE W SUITE 116

City SEATTLE State WA Zip Code 98199-1290

FEC ID number of contributing federal political committee. **C** C00297853

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2013

**Transaction ID : SA11.34222**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

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

Mailing Address 55 GLENLAKE PKWY NE

City ATLANTA State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

**Transaction ID : SA11.34376**

Amount of Each Receipt this Period  
 3000.00

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 37 OF 94 |
|   | <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)  
**US APPLE ASSOCIATION PAC**

Mailing Address 8233 OLD COURTHOUSE RD STE 200

City State Zip Code  
VIENNA VA 22182-3816

FEC ID number of contributing federal political committee. **C C00344945**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 27 / 2013

**Transaction ID : SA11.34310**

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**VERIZON COMMUNICATIONS GOOD GOV'T CLUB**

Mailing Address 1300 I ST NW LOWR 4

City State Zip Code  
WASHINGTON DC 20005-3314

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2013

**Transaction ID : SA11.34366**

Amount of Each Receipt this Period  
 1000.00  
 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).....

2000.00

57940.89



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

|   |  |   |  |   |  |
|---|--|---|--|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)                                   | PAGE 39 OF 94   |  |   |  |
|   | <input checked="" type="checkbox"/> 17<br><input type="checkbox"/> 20a | <input type="checkbox"/> 18<br><input type="checkbox"/> 20b | <input type="checkbox"/> 19a<br><input type="checkbox"/> 20c | <input type="checkbox"/> 19b<br><input type="checkbox"/> 21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ROBERT DUNBABIN, SR.</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 10 / 2013                           |
| Mailing Address 3049 71ST AVE SE  |  | Amount of Each Disbursement this Period<br>500.00<br><b>Transaction ID : SB17.I6949</b> |
| City<br>MERCER ISLAND   | State<br>WA  |   |
| Zip Code<br>98040-2643  | Purpose of Disbursement<br>REISSUE REFUND CHECK  | Category/<br>Type   |
| Candidate Name  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District:   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ANGELA RIESTERER</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 01 / 2013                           |
| Mailing Address 16231 HILLTOP RD  |  | Amount of Each Disbursement this Period<br>900.00<br><b>Transaction ID : SB17.I6796</b> |
| City<br>REEDSVILLE  | State<br>WI  |   |
| Zip Code<br>54230-9591  | Purpose of Disbursement<br>EXPENSE REIMBURSEMENT   | Category/<br>Type   |
| Candidate Name  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District:   |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. RIVERSTONE RESIDENTIAL GROUP</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 01 / 2013   |
| Mailing Address 3101 WESTERN AVE STE 400  |  | Amount of Each Disbursement this Period<br>900.00<br><b>Transaction ID : SB17.I7055</b><br><b>[MEMO ITEM]</b> |
| City<br>SEATTLE   | State<br>WA  |   |
| Zip Code<br>98121-3017  | Purpose of Disbursement<br>RENT  | Category/<br>Type   |
| Candidate Name  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | State: District:   |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1400.00 |
| <b>TOTAL</b> 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:<br>(check only one)                                   | PAGE 40 OF 94   |  |   |  |
|   | <input checked="" type="checkbox"/> 17<br><input type="checkbox"/> 20a | <input type="checkbox"/> 18<br><input type="checkbox"/> 20b | <input type="checkbox"/> 19a<br><input type="checkbox"/> 20c | <input type="checkbox"/> 19b<br><input type="checkbox"/> 21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANGELA RIESTERER</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 01 / 2013                            |
| Mailing Address 16231 HILLTOP RD   |  | Amount of Each Disbursement this Period<br>1192.59<br><b>Transaction ID : SB17.I7030</b> |
| City REEDSVILLE State WI Zip Code 54230-9591   | Purpose of Disbursement PAYROLL  |  |
| Candidate Name   | Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ANGELA RIESTERER</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 01 / 2013                            |
| Mailing Address 16231 HILLTOP RD   |  | Amount of Each Disbursement this Period<br>1000.00<br><b>Transaction ID : SB17.I7031</b> |
| City REEDSVILLE State WI Zip Code 54230-9591   | Purpose of Disbursement PAYROLL  |  |
| Candidate Name   | Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ANGELA RIESTERER</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 11 / 2013                            |
| Mailing Address 16231 HILLTOP RD   |  | Amount of Each Disbursement this Period<br>1192.59<br><b>Transaction ID : SB17.I7039</b> |
| City REEDSVILLE State WI Zip Code 54230-9591   | Purpose of Disbursement PAYROLL  |  |
| Candidate Name   | Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3385.18 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 41 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ANGELA RIESTERER</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 31 / 2013                            |
| Mailing Address 16231 HILLTOP RD   |  | Amount of Each Disbursement this Period<br>1192.59<br><b>Transaction ID : SB17.I7040</b> |
| City REEDSVILLE State WI Zip Code 54230-9591   | Purpose of Disbursement PAYROLL  |  |
| Candidate Name   | Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ANGELA RIESTERER</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 14 / 2013                           |
| Mailing Address 16231 HILLTOP RD   |  | Amount of Each Disbursement this Period<br>460.78<br><b>Transaction ID : SB17.I7047</b> |
| City REEDSVILLE State WI Zip Code 54230-9591   | Purpose of Disbursement PAYROLL  |   |
| Candidate Name   | Category/Type  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. BLAKE VINTERTUN</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 27 / 2013                            |
| Mailing Address 12523 NE 128TH WAY H-10  |  | Amount of Each Disbursement this Period<br>1410.34<br><b>Transaction ID : SB17.I7043</b> |
| City KIRKLAND State WA Zip Code 98034  | Purpose of Disbursement PAYROLL  |  |
| Candidate Name   | Category/Type  |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |
| State: District:   |  |  |

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|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3063.71 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 42 OF 94 |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BLAKE VINTERTUN</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>12 / 12 / 2013                            |
| Mailing Address 12523 NE 128TH WAY H-10  |   | Amount of Each Disbursement this Period<br>1410.34<br><b>Transaction ID : SB17.I7044</b> |
| City<br>KIRKLAND   | State<br>WA   |  |
| Zip Code<br>98034  | Purpose of Disbursement<br>PAYROLL  | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. BLAKE VINTERTUN</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>12 / 31 / 2013                            |
| Mailing Address 12523 NE 128TH WAY H-10  |   | Amount of Each Disbursement this Period<br>1410.34<br><b>Transaction ID : SB17.I7045</b> |
| City<br>KIRKLAND   | State<br>WA   |  |
| Zip Code<br>98034  | Purpose of Disbursement<br>PAYROLL  | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. BLAKE VINTERTUN</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 14 / 2013                            |
| Mailing Address 12523 NE 128TH WAY H-10  |   | Amount of Each Disbursement this Period<br>1410.34<br><b>Transaction ID : SB17.I7048</b> |
| City<br>KIRKLAND   | State<br>WA   |  |
| Zip Code<br>98034  | Purpose of Disbursement<br>PAYROLL  | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4231.02 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 43 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ALTICOR</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 01 / 2013</b>                           |
| Mailing Address <b>419 NEW JERSEY AVE SE</b>   |  | Amount of Each Disbursement this Period<br><b>150.00</b><br><b>Transaction ID : SB17.I6800</b> |
| City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20003-4007</b>  | Purpose of Disbursement<br><b>FUNDRAISER VENUE RENTAL</b>  |  |
| 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:   |  |  |

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|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ALTICOR</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>11 / 12 / 2013</b>                           |
| Mailing Address <b>419 NEW JERSEY AVE SE</b>   |  | Amount of Each Disbursement this Period<br><b>150.00</b><br><b>Transaction ID : SB17.I6970</b> |
| City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20003-4007</b>  | Purpose of Disbursement<br><b>EVENT ROOM RENTAL</b>  |  |
| 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)<br><b>C. ALTICOR</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>12 / 03 / 2013</b>                           |
| Mailing Address <b>419 NEW JERSEY AVE SE</b>   |  | Amount of Each Disbursement this Period<br><b>300.00</b><br><b>Transaction ID : SB17.I6971</b> |
| City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20003-4007</b>  | Purpose of Disbursement<br><b>EVENT ROOM RENTAL</b>  |  |
| 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:   |  |  |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <b>600.00</b> |
| <b>TOTAL</b> 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:<br>(check only one)          | PAGE 44 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. AMERICAN EXPRESS</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 02 / 2013                         |
| Mailing Address PO BOX 53852   |   | Amount of Each Disbursement this Period<br>1.31<br><b>Transaction ID : SB17.I6972</b> |
| City<br>PHOENIX  | State<br>AZ   |   |
| Zip Code<br>85072-3852   | Purpose of Disbursement<br>CREDIT CARD PROCESSING FEES  | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. AMERICAN EXPRESS</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 07 / 2013                         |
| Mailing Address PO BOX 53852   |   | Amount of Each Disbursement this Period<br>0.87<br><b>Transaction ID : SB17.I6973</b> |
| City<br>PHOENIX  | State<br>AZ   |   |
| Zip Code<br>85072-3852   | Purpose of Disbursement<br>CREDIT CARD PROCESSING FEES  | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

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|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. AMERICAN EXPRESS</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 18 / 2013                         |
| Mailing Address PO BOX 53852   |   | Amount of Each Disbursement this Period<br>0.87<br><b>Transaction ID : SB17.I6975</b> |
| City<br>PHOENIX  | State<br>AZ   |   |
| Zip Code<br>85072-3852   | Purpose of Disbursement<br>CREDIT CARD PROCESSING FEES  | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

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|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 3.05 |
| <b>TOTAL</b> 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:<br>(check only one)          |                                    | PAGE 45 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. AMERICAN EXPRESS</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 18 / 2013                         |
| Mailing Address PO BOX 53852   |   | Amount of Each Disbursement this Period<br>0.87<br><b>Transaction ID : SB17.I6976</b> |
| City<br>PHOENIX  | State<br>AZ   |   |
| Zip Code<br>85072-3852   | Purpose of Disbursement<br>CREDIT CARD PROCESSING FEES  | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

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|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AMERICAN EXPRESS</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 19 / 2013                          |
| Mailing Address PO BOX 53852   |   | Amount of Each Disbursement this Period<br>14.60<br><b>Transaction ID : SB17.I6977</b> |
| City<br>PHOENIX  | State<br>AZ   |  |
| Zip Code<br>85072-3852   | Purpose of Disbursement<br>CREDIT CARD PROCESSING FEES  | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

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|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. AMERICAN EXPRESS</b>  |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>12 / 02 / 2013                         |
| Mailing Address PO BOX 53852   |   | Amount of Each Disbursement this Period<br>3.04<br><b>Transaction ID : SB17.I6978</b> |
| City<br>PHOENIX  | State<br>AZ   |   |
| Zip Code<br>85072-3852   | Purpose of Disbursement<br>CREDIT CARD PROCESSING FEES  | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

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|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 18.51 |
| <b>TOTAL</b> 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:<br>(check only one)          | PAGE 46 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. AMERICAN EXPRESS</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>12 / 27 / 2013 |
| Mailing Address PO BOX 53852  |  | Amount of Each Disbursement this Period<br>14.60              |
| City<br>PHOENIX   | State<br>AZ  |   |
| Zip Code<br>85072-3852  | Purpose of Disbursement<br>CREDIT CARD PROCESSING FEES   | Transaction ID : SB17.I6979                                   |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

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| Full Name (Last, First, Middle Initial)<br><b>B. ASPECT CONSULTING LLC</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 11 / 2013 |
| Mailing Address 8401 EXCELSIOR DRIVE<br>SUITE 103   |  | Amount of Each Disbursement this Period<br>750.00             |
| City<br>MADISON   | State<br>WI  |   |
| Zip Code<br>53717   | Purpose of Disbursement<br>COMPLIANCE CONSULTING   | Transaction ID : SB17.I6987                                   |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ASPECT CONSULTING LLC</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 27 / 2013 |
| Mailing Address 8401 EXCELSIOR DRIVE<br>SUITE 103   |  | Amount of Each Disbursement this Period<br>750.00             |
| City<br>MADISON   | State<br>WI  |   |
| Zip Code<br>53717   | Purpose of Disbursement<br>COMPLIANCE CONSULTING   | Transaction ID : SB17.I6988                                   |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1514.60 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 47 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |  |                   |   |  |
|---|--|-------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ASPECT CONSULTING LLC</b>  |  |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>12 / 09 / 2013 |  |
| Mailing Address 8401 EXCELSIOR DRIVE<br>SUITE 103   |  |                   | Amount of Each Disbursement this Period<br>750.00             |  |
| City<br>MADISON   | State<br>WI  | Zip Code<br>53717 | Transaction ID : SB17.I6989                                   |  |
| Purpose of Disbursement<br>COMPLIANCE CONSULTING  |  | Category/<br>Type |   |  |
| Candidate Name  |  |                   |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   |   |  |
| State: District:  |  |                   |   |  |

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|---|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. AT&amp;T</b>   |  |                        | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 01 / 2013 |  |
| Mailing Address PO BOX 78522  |  |                        | Amount of Each Disbursement this Period<br>1252.90            |  |
| City<br>PHOENIX   | State<br>AZ  | Zip Code<br>85062-8522 | Transaction ID : SB17.I6795                                   |  |
| Purpose of Disbursement<br>PHONE BILL   |  | Category/<br>Type      |   |  |
| Candidate Name  |  |                        |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                        |   |  |
| State: District:  |  |                        |   |  |

|   |  |                        |   |  |
|---|--|------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. AT&amp;T</b>   |  |                        | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 17 / 2013 |  |
| Mailing Address PO BOX 78522  |  |                        | Amount of Each Disbursement this Period<br>484.73             |  |
| City<br>PHOENIX   | State<br>AZ  | Zip Code<br>85062-8522 | Transaction ID : SB17.I6991                                   |  |
| Purpose of Disbursement<br>PHONE BILL   |  | Category/<br>Type      |   |  |
| Candidate Name  |  |                        |   |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                        |   |  |
| State: District:  |  |                        |   |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 2487.63 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 48 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. AT&amp;T</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 27 / 2013 |
| Mailing Address PO BOX 78522  |  | Amount of Each Disbursement this Period<br>615.50             |
| City<br>PHOENIX   | State<br>AZ  |   |
| Zip Code<br>85062-8522  | Purpose of Disbursement<br>PHONE BILL  | Transaction ID : SB17.I6992                                   |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. AT&amp;T</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>12 / 17 / 2013 |
| Mailing Address PO BOX 78522  |  | Amount of Each Disbursement this Period<br>780.25             |
| City<br>PHOENIX   | State<br>AZ  |   |
| Zip Code<br>85062-8522  | Purpose of Disbursement<br>PHONE BILL  | Transaction ID : SB17.I6993                                   |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. BANK OF AMERICA</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 01 / 2013 |
| Mailing Address 2800 NE 125TH ST  |  | Amount of Each Disbursement this Period<br>124.49             |
| City<br>SEATTLE   | State<br>WA  |   |
| Zip Code<br>98125-4331  | Purpose of Disbursement<br>CREDIT CARD PAYMENT *SEE ITEMIZATION*   | Transaction ID : SB17.I6952                                   |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1520.24 |
| <b>TOTAL</b> 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 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ARCO</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 21 / 2013 |
| Mailing Address 501 WESTLAKE PARK BLVD   |  | Amount of Each Disbursement this Period<br>4.04               |
| City HOUSTON State TX Zip Code 77079-2604  | Purpose of Disbursement TRAVEL EXPENSE |   |
| Candidate Name   | Category/Type                          | Transaction ID : SB17.I7065<br><b>[MEMO ITEM]</b>             |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District:                       |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. SHELL OIL</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 21 / 2013 |
| Mailing Address PO BOX 2463  |  | Amount of Each Disbursement this Period<br>51.67              |
| City HOUSTON State TX Zip Code 77252-2463  | Purpose of Disbursement TRAVEL EXPENSE |   |
| Candidate Name   | Category/Type                          | Transaction ID : SB17.I7064<br><b>[MEMO ITEM]</b>             |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District:                       |   |

|  |                                 |   |
|--|---------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. USPS</b>  |                                 | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 06 / 2013 |
| Mailing Address 475 LENFANT PLZ SW   |                                 | Amount of Each Disbursement this Period<br>19.95              |
| City WASHINGTON State DC Zip Code 20260-0001   | Purpose of Disbursement POSTAGE |   |
| Candidate Name   | Category/Type                   | Transaction ID : SB17.I7067<br><b>[MEMO ITEM]</b>             |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District:                |   |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 50 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |  |                        |   |
|---|--|------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. VERIZON WIRELESS</b>   |  |                        | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 05 / 2013 |
| Mailing Address 175 BELLEVUE SQ   |  |                        | Amount of Each Disbursement this Period<br>136.58             |
| City<br>BELLEVUE  | State<br>WA  | Zip Code<br>98004-5021 |   |
| Purpose of Disbursement<br>CELLPHONE  |  | Category/<br>Type      | <b>Transaction ID : SB17.I7068</b><br><br><b>[MEMO ITEM]</b>  |
| Candidate Name  |  |                        |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                        |   |
| State: _____  | District: _____  |                        |   |

|   |  |                        |   |
|---|--|------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. BANK OF AMERICA</b>  |  |                        | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 01 / 2013 |
| Mailing Address 2800 NE 125TH ST  |  |                        | Amount of Each Disbursement this Period<br>136.24             |
| City<br>SEATTLE   | State<br>WA  | Zip Code<br>98125-4331 |   |
| Purpose of Disbursement<br>CREDIT CARD PAYMENT *SEE ITEMIZATION*  |  | Category/<br>Type      | <b>Transaction ID : SB17.I6953</b>                            |
| Candidate Name  |  |                        |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                        |   |
| State: _____  | District: _____  |                        |   |

|   |  |                        |   |
|---|--|------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ALASKA AIRLINES</b>  |  |                        | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 09 / 2013 |
| Mailing Address PO BOX 24948  |  |                        | Amount of Each Disbursement this Period<br>13.00              |
| City<br>SEATTLE   | State<br>WA  | Zip Code<br>98124-0948 |   |
| Purpose of Disbursement<br>TRAVEL EXPENSE   |  | Category/<br>Type      | <b>Transaction ID : SB17.I7136</b><br><br><b>[MEMO ITEM]</b>  |
| Candidate Name  |  |                        |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                        |   |
| State: _____  | District: _____  |                        |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 136.24 |
| <b>TOTAL</b> 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:<br>(check only one)          |                                    | PAGE 51 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ALASKA AIRLINES</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>09 / 17 / 2013</b> |
| Mailing Address <b>PO BOX 24948</b>   |  | Amount of Each Disbursement this Period<br><b>13.00</b>              |
| City<br><b>SEATTLE</b>  | State<br><b>WA</b>   |  |
| Zip Code<br><b>98124-0948</b>   | Purpose of Disbursement<br><b>TRAVEL EXPENSE</b>   | <b>Transaction ID : SB17.I7137</b>                                   |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>[MEMO ITEM]</b>   |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ALASKA AIRLINES</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>09 / 21 / 2013</b> |
| Mailing Address <b>PO BOX 24948</b>   |  | Amount of Each Disbursement this Period<br><b>7.00</b>               |
| City<br><b>SEATTLE</b>  | State<br><b>WA</b>   |  |
| Zip Code<br><b>98124-0948</b>   | Purpose of Disbursement<br><b>INTERNET</b>   | <b>Transaction ID : SB17.I7138</b>                                   |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>[MEMO ITEM]</b>   |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. UNITED AIRLINES</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>09 / 14 / 2013</b> |
| Mailing Address <b>PO BOX 28870</b>   |  | Amount of Each Disbursement this Period<br><b>8.49</b>               |
| City<br><b>TUCSON</b>   | State<br><b>AZ</b>   |  |
| Zip Code<br><b>85726-8870</b>   | Purpose of Disbursement<br><b>TRAVEL EXPENSE</b>   | <b>Transaction ID : SB17.I7139</b>                                   |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>[MEMO ITEM]</b>   |
| State: District:  |  |  |

|   |             |
|---|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>0.00</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |             |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 52 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. VERIZON WIRELESS</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 20 / 2013 |
| Mailing Address 175 BELLEVUE SQ  |  | Amount of Each Disbursement this Period<br>35.00              |
| City BELLEVUE State WA Zip Code 98004-5021   | Purpose of Disbursement<br>CELLPHONE   |   |
| Candidate Name   |  | Transaction ID : SB17.I7135<br><b>[MEMO ITEM]</b>             |
| 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)<br><b>B. BANK OF AMERICA</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 01 / 2013 |
| Mailing Address 2800 NE 125TH ST   |  | Amount of Each Disbursement this Period<br>370.66             |
| City SEATTLE State WA Zip Code 98125-4331  | Purpose of Disbursement<br>CREDIT CARD PAYMENT *SEE ITEMIZATION*   |   |
| Candidate Name   |  | Transaction ID : SB17.I6954                                   |
| 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)<br><b>C. BANK OF AMERICA</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 27 / 2013 |
| Mailing Address 2800 NE 125TH ST   |  | Amount of Each Disbursement this Period<br>1.40               |
| City SEATTLE State WA Zip Code 98125-4331  | Purpose of Disbursement<br>BANK FEE  |   |
| Candidate Name   |  | Transaction ID : SB17.I7117<br><b>[MEMO ITEM]</b>             |
| 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  |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 370.66 |
| <b>TOTAL</b> 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 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial)  
**A. PUBLIC STORAGE**

Mailing Address 13105 SE 30TH ST

City BELLEVUE State WA Zip Code 98005-4413

Purpose of Disbursement STORAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 03 / 2013

Amount of Each Disbursement this Period: 204.00

Transaction ID : SB17.I7118

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. VERIZON WIRELESS**

Mailing Address 175 BELLEVUE SQ

City BELLEVUE State WA Zip Code 98004-5021

Purpose of Disbursement CELLPHONE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 09 / 08 / 2013

Amount of Each Disbursement this Period: 30.00

Transaction ID : SB17.I7119

[MEMO ITEM]

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

Mailing Address 2800 NE 125TH ST

City SEATTLE State WA Zip Code 98125-4331

Purpose of Disbursement CREDIT CARD PAYMENT \*SEE ITEMIZATION\*

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 01 / 2013

Amount of Each Disbursement this Period: 2958.39

Transaction ID : SB17.I6955

**SUBTOTAL** of Disbursements This Page (optional) ..... 2958.39

**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:<br>(check only one)  | PAGE 54 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ALASKA AIRLINES</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 09 / 2013 |
| Mailing Address PO BOX 24948  |  | Amount of Each Disbursement this Period<br>642.90             |
| City<br>SEATTLE   | State<br>WA  |   |
| Zip Code<br>98124-0948  | Purpose of Disbursement<br>TRAVEL EXPENSE  | Transaction ID : SB17.I7099                                   |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ALASKA AIRLINES</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 05 / 2013 |
| Mailing Address PO BOX 24948  |  | Amount of Each Disbursement this Period<br>613.80             |
| City<br>SEATTLE   | State<br>WA  |   |
| Zip Code<br>98124-0948  | Purpose of Disbursement<br>TRAVEL EXPENSE  | Transaction ID : SB17.I7102                                   |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. ALASKA AIRLINES</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 05 / 2013 |
| Mailing Address PO BOX 24948  |  | Amount of Each Disbursement this Period<br>820.80             |
| City<br>SEATTLE   | State<br>WA  |   |
| Zip Code<br>98124-0948  | Purpose of Disbursement<br>TRAVEL EXPENSE  | Transaction ID : SB17.I7103                                   |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 55 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. MAILCHIMP</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 23 / 2013 |
| Mailing Address 512 MEANS STREET<br>SUITE 404  |  | Amount of Each Disbursement this Period<br>150.00             |
| City ATLANTA   | State GA Zip Code 30318  |   |
| Purpose of Disbursement<br>EMAIL SERVICES  | Category/Type  | Transaction ID : SB17.I7101<br><b>[MEMO ITEM]</b>             |
| 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)<br><b>B. REGISTER.COM</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 20 / 2013 |
| Mailing Address 575 8TH AVE FL 11  |  | Amount of Each Disbursement this Period<br>0.99               |
| City NEW YORK  | State NY Zip Code 10018-3549   |   |
| Purpose of Disbursement<br>WEB HOSTING   | Category/Type  | Transaction ID : SB17.I7100<br><b>[MEMO ITEM]</b>             |
| 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)<br><b>C. UNITED AIRLINES</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 09 / 2013 |
| Mailing Address PO BOX 28870   |  | Amount of Each Disbursement this Period<br>642.90             |
| City TUCSON  | State AZ Zip Code 85726-8870   |   |
| Purpose of Disbursement<br>TRAVEL EXPENSE  | Category/Type  | Transaction ID : SB17.I7097<br><b>[MEMO ITEM]</b>             |
| 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:   |  |   |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 56 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. UNITED AIRLINES</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 09 / 2013 |
| Mailing Address PO BOX 28870  |  | Amount of Each Disbursement this Period<br>87.00              |
| City<br>TUCSON  | State<br>AZ  |   |
| Zip Code<br>85726-8870  | Purpose of Disbursement<br>TRAVEL EXPENSE  | Transaction ID : SB17.I7098                                   |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. BANK OF AMERICA</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 01 / 2013 |
| Mailing Address 2800 NE 125TH ST  |  | Amount of Each Disbursement this Period<br>156.97             |
| City<br>SEATTLE   | State<br>WA  |   |
| Zip Code<br>98125-4331  | Purpose of Disbursement<br>CREDIT CARD PAYMENT *SEE ITEMIZATION*   | Transaction ID : SB17.I6956                                   |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. RASMUSSENREPORTS.COM</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 15 / 2013 |
| Mailing Address 625 COOKMAN AVE STE 2   |  | Amount of Each Disbursement this Period<br>19.95              |
| City<br>ASBURY PARK   | State<br>NJ  |   |
| Zip Code<br>07712-7144  | Purpose of Disbursement<br>SUBSCRIPTION  | Transaction ID : SB17.I7144                                   |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 156.97 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 57 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. REGISTER.COM</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 18 / 2013 |
| Mailing Address 575 8TH AVE FL 11   |  | Amount of Each Disbursement this Period<br>27.95              |
| City<br>NEW YORK  | State<br>NY  |   |
| Zip Code<br>10018-3549  | Purpose of Disbursement<br>WEB HOSTING   | Transaction ID : SB17.I7145                                   |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. VERIZON WIRELESS</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 19 / 2013 |
| Mailing Address 175 BELLEVUE SQ   |  | Amount of Each Disbursement this Period<br>50.00              |
| City<br>BELLEVUE  | State<br>WA  |   |
| Zip Code<br>98004-5021  | Purpose of Disbursement<br>CELLPHONE   | Transaction ID : SB17.I7146                                   |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | [MEMO ITEM]   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. BANK OF AMERICA</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 31 / 2013 |
| Mailing Address 2800 NE 125TH ST  |  | Amount of Each Disbursement this Period<br>1100.91            |
| City<br>SEATTLE   | State<br>WA  |   |
| Zip Code<br>98125-4331  | Purpose of Disbursement<br>CREDIT CARD PAYMENT *SEE ITEMIZATION*   | Transaction ID : SB17.I6957                                   |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1100.91 |
| <b>TOTAL</b> 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:<br>(check only one)          | PAGE 58 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ALASKA AIRLINES</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 16 / 2013</b> |
| Mailing Address <b>PO BOX 24948</b>  |  | Amount of Each Disbursement this Period<br><b>162.00</b>             |
| City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98124-0948</b>   | Purpose of Disbursement<br><b>TRAVEL EXPENSE</b>   |  |
| Candidate Name   |  | Transaction ID : <b>SB17.I7092</b>                                   |
| 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  | <b>[MEMO ITEM]</b>   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ALASKA AIRLINES</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 21 / 2013</b> |
| Mailing Address <b>PO BOX 24948</b>  |  | Amount of Each Disbursement this Period<br><b>205.00</b>             |
| City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98124-0948</b>   | Purpose of Disbursement<br><b>TRAVEL EXPENSE</b>   |  |
| Candidate Name   |  | Transaction ID : <b>SB17.I7093</b>                                   |
| 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  | <b>[MEMO ITEM]</b>   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. BANK OF AMERICA</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 25 / 2013</b> |
| Mailing Address <b>2800 NE 125TH ST</b>  |  | Amount of Each Disbursement this Period<br><b>75.00</b>              |
| City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98125-4331</b>   | Purpose of Disbursement<br><b>CREDIT CARD ANNUAL FEE</b>   |  |
| Candidate Name   |  | Transaction ID : <b>SB17.I7096</b>                                   |
| 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  | <b>[MEMO ITEM]</b>   |

|   |             |
|---|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>0.00</b> |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 59 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. MAILCHIMP</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 23 / 2013 |
| Mailing Address 512 MEANS STREET<br>SUITE 404  |  | Amount of Each Disbursement this Period<br>150.00             |
| City ATLANTA   | State GA Zip Code 30318  |   |
| Purpose of Disbursement<br>EMAIL SERVICES  | Category/Type  | Transaction ID : SB17.I7094<br><b>[MEMO ITEM]</b>             |
| 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)<br><b>B. REGISTER.COM</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 16 / 2013 |
| Mailing Address 575 8TH AVE FL 11  |  | Amount of Each Disbursement this Period<br>27.95              |
| City NEW YORK  | State NY Zip Code 10018-3549   |   |
| Purpose of Disbursement<br>WEB HOSTING   | Category/Type  | Transaction ID : SB17.I7090<br><b>[MEMO ITEM]</b>             |
| 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)<br><b>C. REGISTER.COM</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 24 / 2013 |
| Mailing Address 575 8TH AVE FL 11  |  | Amount of Each Disbursement this Period<br>0.99               |
| City NEW YORK  | State NY Zip Code 10018-3549   |   |
| Purpose of Disbursement<br>WEB HOSTING   | Category/Type  | Transaction ID : SB17.I7091<br><b>[MEMO ITEM]</b>             |
| 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:   |  |   |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 60 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |  |                   |   |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. THE CONGRESSIONAL CLUB</b>   |  |                   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 25 / 2013 |
| Mailing Address 2001 NEW HAMPSHIRE AVE NW   |  |                   | Amount of Each Disbursement this Period<br>480.00             |
| City<br>WASHINGTON  | State<br>DC  | Zip Code<br>20009 |   |
| Purpose of Disbursement<br>GIFTS  |  | Category/<br>Type | <b>Transaction ID : SB17.I7095</b>                            |
| Candidate Name  |  |                   |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                   | <b>[MEMO ITEM]</b>  |
| State: District:  |  |                   |   |

|   |  |                        |   |
|---|--|------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. BANK OF AMERICA</b>  |  |                        | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 31 / 2013 |
| Mailing Address 2800 NE 125TH ST  |  |                        | Amount of Each Disbursement this Period<br>996.41             |
| City<br>SEATTLE   | State<br>WA  | Zip Code<br>98125-4331 |   |
| Purpose of Disbursement<br>CREDIT CARD PAYMENT *SEE ITEMIZATION*  |  | Category/<br>Type      | <b>Transaction ID : SB17.I6958</b>                            |
| Candidate Name  |  |                        |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                        |   |
| State: District:  |  |                        |   |

|   |  |                        |   |
|---|--|------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. USPS</b>   |  |                        | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 24 / 2013 |
| Mailing Address 475 LENFANT PLZ SW  |  |                        | Amount of Each Disbursement this Period<br>920.00             |
| City<br>WASHINGTON  | State<br>DC  | Zip Code<br>20260-0001 |   |
| Purpose of Disbursement<br>POSTAGE  |  | Category/<br>Type      | <b>Transaction ID : SB17.I7057</b>                            |
| Candidate Name  |  |                        |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |                        | <b>[MEMO ITEM]</b>  |
| State: District:  |  |                        |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 996.41 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 61 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. VERIZON WIRELESS</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 05 / 2013</b> |
| Mailing Address <b>175 BELLEVUE SQ</b>   |  | Amount of Each Disbursement this Period<br><b>27.55</b>              |
| City <b>BELLEVUE</b> State <b>WA</b> Zip Code <b>98004-5021</b>  | Purpose of Disbursement<br><b>CELLPHONE</b>  | Transaction ID : <b>SB17.I7061</b><br><br><b>[MEMO ITEM]</b>         |
| 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)<br><b>B. BANK OF AMERICA</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 31 / 2013</b> |
| Mailing Address <b>2800 NE 125TH ST</b>  |  | Amount of Each Disbursement this Period<br><b>309.00</b>             |
| City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98125-4331</b>   | Purpose of Disbursement<br><b>CREDIT CARD PAYMENT *SEE ITEMIZATION*</b>  | Transaction ID : <b>SB17.I6959</b>                                   |
| 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)<br><b>C. BANK OF AMERICA</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 01 / 2013</b> |
| Mailing Address <b>2800 NE 125TH ST</b>  |  | Amount of Each Disbursement this Period<br><b>75.00</b>              |
| City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98125-4331</b>   | Purpose of Disbursement<br><b>CREDIT CARD ANNUAL FEE</b>   | Transaction ID : <b>SB17.I7122</b><br><br><b>[MEMO ITEM]</b>         |
| 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:   |  |  |

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>309.00</b> |
| <b>TOTAL</b> 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 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A. PUBLIC STORAGE**

Full Name (Last, First, Middle Initial)  
Mailing Address 13105 SE 30TH ST

City BELLEVUE State WA Zip Code 98005-4413

Purpose of Disbursement STORAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 02 / 2013

Amount of Each Disbursement this Period: 204.00

Transaction ID : SB17.I7121

[MEMO ITEM]

**B. VERIZON WIRELESS**

Full Name (Last, First, Middle Initial)  
Mailing Address 175 BELLEVUE SQ

City BELLEVUE State WA Zip Code 98004-5021

Purpose of Disbursement CELLPHONE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 08 / 2013

Amount of Each Disbursement this Period: 30.00

Transaction ID : SB17.I7120

[MEMO ITEM]

**C. BANK OF AMERICA**

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

City SEATTLE State WA Zip Code 98125-4331

Purpose of Disbursement CREDIT CARD PAYMENT \*SEE ITEMIZATION\*

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 31 / 2013

Amount of Each Disbursement this Period: 209.33

Transaction ID : SB17.I6960

**SUBTOTAL** of Disbursements This Page (optional) ..... 209.33

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

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

|   |   |               |  |  |  |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 63 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. ALASKA AIRLINES</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 18 / 2013</b> |
| Mailing Address <b>PO BOX 24948</b>  |  | Amount of Each Disbursement this Period<br><b>7.00</b>               |
| City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98124-0948</b>   | Purpose of Disbursement<br><b>INTERNET</b>   |  |
| Candidate Name   |  | <b>Transaction ID : SB17.I7124</b>                                   |
| 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  | <b>[MEMO ITEM]</b>   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. ALASKA AIRLINES</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 22 / 2013</b> |
| Mailing Address <b>PO BOX 24948</b>  |  | Amount of Each Disbursement this Period<br><b>13.00</b>              |
| City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98124-0948</b>   | Purpose of Disbursement<br><b>TRAVEL EXPENSE</b>   |  |
| Candidate Name   |  | <b>Transaction ID : SB17.I7125</b>                                   |
| 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  | <b>[MEMO ITEM]</b>   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ALASKA AIRLINES</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 24 / 2013</b> |
| Mailing Address <b>PO BOX 24948</b>  |  | Amount of Each Disbursement this Period<br><b>14.00</b>              |
| City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98124-0948</b>   | Purpose of Disbursement<br><b>TRAVEL EXPENSE</b>   |  |
| Candidate Name   |  | <b>Transaction ID : SB17.I7126</b>                                   |
| 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  | <b>[MEMO ITEM]</b>   |

|   |             |
|---|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>0.00</b> |
| <b>TOTAL</b> 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:<br>(check only one)          | PAGE 64 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BANK OF AMERICA</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 01 / 2013</b> |
| Mailing Address <b>2800 NE 125TH ST</b>  |  | Amount of Each Disbursement this Period<br><b>75.00</b>              |
| City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98125-4331</b>   | Purpose of Disbursement<br><b>CREDIT CARD ANNUAL FEE</b>   |  |
| Candidate Name   |  | Category/Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : <b>SB17.I7128</b><br><b>[MEMO ITEM]</b>             |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. VERIZON WIRELESS</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 20 / 2013</b> |
| Mailing Address <b>175 BELLEVUE SQ</b>   |  | Amount of Each Disbursement this Period<br><b>35.00</b>              |
| City <b>BELLEVUE</b> State <b>WA</b> Zip Code <b>98004-5021</b>  | Purpose of Disbursement<br><b>CELLPHONE</b>  |  |
| Candidate Name   |  | Category/Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : <b>SB17.I7123</b><br><b>[MEMO ITEM]</b>             |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. BANK OF AMERICA</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 31 / 2013</b> |
| Mailing Address <b>2800 NE 125TH ST</b>  |  | Amount of Each Disbursement this Period<br><b>157.17</b>             |
| City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98125-4331</b>   | Purpose of Disbursement<br><b>CREDIT CARD PAYMENT *SEE ITEMIZATION*</b>  |  |
| Candidate Name   |  | Category/Type  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : <b>SB17.I6961</b>                                   |
| State: District:   |  |  |

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>157.17</b> |
| <b>TOTAL</b> 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:<br>(check only one)          | PAGE 65 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. RASMUSSENREPORTS.COM</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 15 / 2013</b> |
| Mailing Address <b>625 COOKMAN AVE STE 2</b>   |  | Amount of Each Disbursement this Period<br><b>19.95</b>              |
| City <b>ASBURY PARK</b> State <b>NJ</b> Zip Code <b>07712-7144</b>   | Purpose of Disbursement<br><b>SUBSCRIPTION</b>   |  |
| 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) | <b>Transaction ID : SB17.I7081</b><br><b>[MEMO ITEM]</b>             |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. VERIZON WIRELESS</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 05 / 2013</b> |
| Mailing Address <b>175 BELLEVUE SQ</b>   |  | Amount of Each Disbursement this Period<br><b>4.03</b>               |
| City <b>BELLEVUE</b> State <b>WA</b> Zip Code <b>98004-5021</b>  | Purpose of Disbursement<br><b>CELLPHONE</b>  |  |
| 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) | <b>Transaction ID : SB17.I7062</b><br><b>[MEMO ITEM]</b>             |
| State: District:   |  |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. VERIZON WIRELESS</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 19 / 2013</b> |
| Mailing Address <b>175 BELLEVUE SQ</b>   |  | Amount of Each Disbursement this Period<br><b>50.00</b>              |
| City <b>BELLEVUE</b> State <b>WA</b> Zip Code <b>98004-5021</b>  | Purpose of Disbursement<br><b>CELLPHONE</b>  |  |
| 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) | <b>Transaction ID : SB17.I7082</b><br><b>[MEMO ITEM]</b>             |
| State: District:   |  |  |

|   |             |
|---|-------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>0.00</b> |
| <b>TOTAL</b> 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 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BANK OF AMERICA</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>11 / 27 / 2013</b> |
| Mailing Address <b>2800 NE 125TH ST</b>  |   | Amount of Each Disbursement this Period<br><b>14.85</b>              |
| City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98125-4331</b>   | Purpose of Disbursement<br><b>CREDIT CARD PAYMENT *SEE ITEMIZATION*</b> |  |
| Candidate Name   | Category/Type   | <b>Transaction ID : SB17.I6962</b>                                   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |  |
| State: District:   |   |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. BANK OF AMERICA</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>11 / 27 / 2013</b> |
| Mailing Address <b>2800 NE 125TH ST</b>  |   | Amount of Each Disbursement this Period<br><b>1353.96</b>            |
| City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98125-4331</b>   | Purpose of Disbursement<br><b>CREDIT CARD PAYMENT *SEE ITEMIZATION*</b> |  |
| Candidate Name   | Category/Type   | <b>Transaction ID : SB17.I6963</b>                                   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |  |
| State: District:   |   |  |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ALASKA AIRLINES</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>11 / 21 / 2013</b> |
| Mailing Address <b>PO BOX 24948</b>  |  | Amount of Each Disbursement this Period<br><b>25.00</b>              |
| City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98124-0948</b>   | Purpose of Disbursement<br><b>TRAVEL EXPENSE</b> |  |
| Candidate Name   | Category/Type                                    | <b>Transaction ID : SB17.I7069</b>                                   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |  |  |
| State: District:   |  |  |

|   |                |
|---|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>1368.81</b> |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 67 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ALASKA AIRLINES</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 15 / 2013 |
| Mailing Address PO BOX 24948  |  | Amount of Each Disbursement this Period<br>25.00              |
| City<br>SEATTLE   | State<br>WA  |   |
| Zip Code<br>98124-0948  | Purpose of Disbursement<br>TRAVEL EXPENSE  | Transaction ID : SB17.I7072<br><b>[MEMO ITEM]</b>             |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. BANK OF AMERICA</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 01 / 2013 |
| Mailing Address 2800 NE 125TH ST  |  | Amount of Each Disbursement this Period<br>75.00              |
| City<br>SEATTLE   | State<br>WA  |   |
| Zip Code<br>98125-4331  | Purpose of Disbursement<br>CREDIT CARD ANNUAL FEE  | Transaction ID : SB17.I7076<br><b>[MEMO ITEM]</b>             |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. HOLIDAY INN WASHINGTON-CAPITOL</b>                                       |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 08 / 2013 |
| Mailing Address 550 C ST SW   |  | Amount of Each Disbursement this Period<br>990.45             |
| City<br>WASHINGTON  | State<br>DC  |   |
| Zip Code<br>20024   | Purpose of Disbursement<br>LODGING   | Transaction ID : SB17.I7075<br><b>[MEMO ITEM]</b>             |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |      |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 68 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BANK OF AMERICA</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>11 / 27 / 2013</b> |
| Mailing Address <b>2800 NE 125TH ST</b>  |  | Amount of Each Disbursement this Period<br><b>159.02</b>             |
| City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98125-4331</b>   | Purpose of Disbursement<br><b>CREDIT CARD PAYMENT *SEE ITEMIZATION*</b>  |  |
| Candidate Name   |  | <b>Transaction ID : SB17.I6964</b>                                   |
| 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)<br><b>B. ALASKA AIRLINES</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 28 / 2013</b> |
| Mailing Address <b>PO BOX 24948</b>  |  | Amount of Each Disbursement this Period<br><b>7.00</b>               |
| City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98124-0948</b>   | Purpose of Disbursement<br><b>INTERNET</b>   |  |
| Candidate Name   |  | <b>Transaction ID : SB17.I7129</b>                                   |
| 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  | <b>[MEMO ITEM]</b>   |

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. ALASKA AIRLINES</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>11 / 13 / 2013</b> |
| Mailing Address <b>PO BOX 24948</b>  |  | Amount of Each Disbursement this Period<br><b>14.00</b>              |
| City <b>SEATTLE</b> State <b>WA</b> Zip Code <b>98124-0948</b>   | Purpose of Disbursement<br><b>TRAVEL EXPENSE</b>   |  |
| Candidate Name   |  | <b>Transaction ID : SB17.I7130</b>                                   |
| 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  | <b>[MEMO ITEM]</b>   |

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>159.02</b> |
| <b>TOTAL</b> 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:<br>(check only one)          | PAGE 69 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ALASKA AIRLINES</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 22 / 2013 |
| Mailing Address PO BOX 24948  |  | Amount of Each Disbursement this Period<br>14.00              |
| City<br>SEATTLE   | State<br>WA  |   |
| Zip Code<br>98124-0948  | Purpose of Disbursement<br>TRAVEL EXPENSE  | Transaction ID : SB17.I7133<br><b>[MEMO ITEM]</b>             |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. UNITED AIRLINES</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 31 / 2013 |
| Mailing Address PO BOX 28870  |  | Amount of Each Disbursement this Period<br>7.99               |
| City<br>TUCSON  | State<br>AZ  |   |
| Zip Code<br>85726-8870  | Purpose of Disbursement<br>TRAVEL EXPENSE  | Transaction ID : SB17.I7132<br><b>[MEMO ITEM]</b>             |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. VERIZON WIRELESS</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 20 / 2013 |
| Mailing Address 175 BELLEVUE SQ   |  | Amount of Each Disbursement this Period<br>35.00              |
| City<br>BELLEVUE  | State<br>WA  |   |
| Zip Code<br>98004-5021  | Purpose of Disbursement<br>CELLPHONE   | Transaction ID : SB17.I7134<br><b>[MEMO ITEM]</b>             |
| Candidate Name  | Category/Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 70 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. BANK OF AMERICA</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 27 / 2013 |
| Mailing Address 2800 NE 125TH ST   |  | Amount of Each Disbursement this Period<br>74.22              |
| City SEATTLE State WA Zip Code 98125-4331  | Purpose of Disbursement<br>CREDIT CARD PAYMENT *SEE ITEMIZATION*   |   |
| Candidate Name   | Category/Type  | Transaction ID : SB17.I6965                                   |
| 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)<br><b>B. RASMUSSENREPORTS.COM</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 15 / 2013 |
| Mailing Address 625 COOKMAN AVE STE 2  |  | Amount of Each Disbursement this Period<br>19.95              |
| City ASBURY PARK State NJ Zip Code 07712-7144  | Purpose of Disbursement<br>SUBSCRIPTION  |   |
| Candidate Name   | Category/Type  | Transaction ID : SB17.I7078<br>[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)<br><b>C. VERIZON WIRELESS</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 19 / 2013 |
| Mailing Address 175 BELLEVUE SQ  |  | Amount of Each Disbursement this Period<br>50.00              |
| City BELLEVUE State WA Zip Code 98004-5021   | Purpose of Disbursement<br>CELLPHONE   |   |
| Candidate Name   | Category/Type  | Transaction ID : SB17.I7079<br>[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:   |  |   |

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 74.22 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 71 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. BANK OF AMERICA</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 27 / 2013 |
| Mailing Address 2800 NE 125TH ST   |  | Amount of Each Disbursement this Period<br>1029.04            |
| City SEATTLE State WA Zip Code 98125-4331  | Purpose of Disbursement<br>CREDIT CARD PAYMENT *SEE ITEMIZATION*   |   |
| Candidate Name   |  | Transaction ID : SB17.I6966                                   |
| 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)<br><b>B. ALASKA AIRLINES</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 07 / 2013 |
| Mailing Address PO BOX 24948   |  | Amount of Each Disbursement this Period<br>812.80             |
| City SEATTLE State WA Zip Code 98124-0948  | Purpose of Disbursement<br>TRAVEL EXPENSE  |   |
| Candidate Name   |  | Transaction ID : SB17.I7084                                   |
| 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)<br><b>C. MAILCHIMP</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 23 / 2013 |
| Mailing Address 512 MEANS STREET<br>SUITE 404  |  | Amount of Each Disbursement this Period<br>150.00             |
| City ATLANTA State GA Zip Code 30318   | Purpose of Disbursement<br>EMAIL SERVICES  |   |
| Candidate Name   |  | Transaction ID : SB17.I7088                                   |
| 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]   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1029.04 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 72 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. REGISTER.COM</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 21 / 2013 |
| Mailing Address 575 8TH AVE FL 11   |  | Amount of Each Disbursement this Period<br>27.95              |
| City<br>NEW YORK  | State<br>NY  |   |
| Purpose of Disbursement<br>WEB HOSTING  | Zip Code<br>10018-3549   | Category/<br>Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. REGISTER.COM</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 21 / 2013 |
| Mailing Address 575 8TH AVE FL 11   |  | Amount of Each Disbursement this Period<br>0.99               |
| City<br>NEW YORK  | State<br>NY  |   |
| Purpose of Disbursement<br>WEB REGISTRATION   | Zip Code<br>10018-3549   | Category/<br>Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. THE CAPITOL HILL CLUB</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 15 / 2013 |
| Mailing Address 300 1ST ST SE   |  | Amount of Each Disbursement this Period<br>25.00              |
| City<br>WASHINGTON  | State<br>DC  |   |
| Purpose of Disbursement<br>MEETING EXPENSE  | Zip Code<br>20003-1801   | Category/<br>Type   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |      |
|---|------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 0.00 |
| <b>TOTAL</b> 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:<br>(check only one)          |                                    | PAGE 73 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |                                      |   |
|--|--------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. VERIZON WIRELESS</b>  |                                      | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 06 / 2013 |
| Mailing Address 175 BELLEVUE SQ  |                                      | Amount of Each Disbursement this Period<br>75.00              |
| City BELLEVUE State WA Zip Code 98004-5021   | Purpose of Disbursement<br>CELLPHONE |   |
| Candidate Name   | Category/Type                        | Transaction ID : SB17.I7089<br><b>[MEMO ITEM]</b>             |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District:                     |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. BANK OF AMERICA</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 27 / 2013 |
| Mailing Address 2800 NE 125TH ST   |  | Amount of Each Disbursement this Period<br>75.00              |
| City SEATTLE State WA Zip Code 98125-4331  | Purpose of Disbursement<br>CREDIT CARD PAYMENT *SEE ITEMIZATION* |   |
| Candidate Name   | Category/Type  | Transaction ID : SB17.I6967                                   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District:   |   |

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. BANK OF AMERICA</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 01 / 2013 |
| Mailing Address 2800 NE 125TH ST   |   | Amount of Each Disbursement this Period<br>75.00              |
| City SEATTLE State WA Zip Code 98125-4331  | Purpose of Disbursement<br>CREDIT CARD ANNUAL FEE |   |
| Candidate Name   | Category/Type                                     | Transaction ID : SB17.I7077<br><b>[MEMO ITEM]</b>             |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District:                                  |   |

|  |       |
|--|-------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 75.00 |
| <b>TOTAL</b> 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:<br>(check only one)          | PAGE 74 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. BANK OF AMERICA</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 27 / 2013 |
| Mailing Address 2800 NE 125TH ST  |  | Amount of Each Disbursement this Period<br>1398.24            |
| City SEATTLE  | State WA Zip Code 98125-4331   |   |
| Purpose of Disbursement<br>CREDIT CARD PAYMENT *SEE ITEMIZATION*  |  | Transaction ID : SB17.I6968                                   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Category/<br>Type   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. PALISADE</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 01 / 2013 |
| Mailing Address 2601 W MARINA PL  |  | Amount of Each Disbursement this Period<br>1161.24            |
| City SEATTLE  | State WA Zip Code 98199-4331   |   |
| Purpose of Disbursement<br>EVENT CATERING EXPENSE   |  | Transaction ID : SB17.I7105                                   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Category/<br>Type   |
| State: District:  |  | [MEMO ITEM]   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. PUBLIC STORAGE</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 02 / 2013 |
| Mailing Address 13105 SE 30TH ST  |  | Amount of Each Disbursement this Period<br>204.00             |
| City BELLEVUE   | State WA Zip Code 98005-4413   |   |
| Purpose of Disbursement<br>STORAGE  |  | Transaction ID : SB17.I7106                                   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Category/<br>Type   |
| State: District:  |  | [MEMO ITEM]   |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1398.24 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 75 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. VERIZON WIRELESS</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 08 / 2013 |
| Mailing Address 175 BELLEVUE SQ  |  | Amount of Each Disbursement this Period<br>30.00              |
| City BELLEVUE State WA Zip Code 98004-5021   | Purpose of Disbursement<br>CELLPHONE   |   |
| Candidate Name   |  | Transaction ID : SB17.I7104<br><b>[MEMO ITEM]</b>             |
| 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)<br><b>B. BELLEVUE GUN CLUB</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 06 / 2013 |
| Mailing Address 13216 SE 32ND ST.  |  | Amount of Each Disbursement this Period<br>231.00             |
| City BELLEVUE State WA Zip Code 98005  | Purpose of Disbursement<br>FUNDRAISER VENUE  |   |
| Candidate Name   |  | Transaction ID : SB17.I6994                                   |
| 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)<br><b>C. CMDI</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 03 / 2013 |
| Mailing Address 7704 LEESBURG PIKE   |  | Amount of Each Disbursement this Period<br>113.60             |
| City FALLS CHURCH State VA Zip Code 22043  | Purpose of Disbursement<br>CREDIT CARD PROCESSING FEES   |   |
| Candidate Name   |  | Transaction ID : SB17.I6980                                   |
| 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  |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 344.60 |
| <b>TOTAL</b> 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:<br>(check only one)          | PAGE 76 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |                                       |  |
|---|---------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CMDI</b>   |                                       | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 21 / 2013</b>                           |
| Mailing Address <b>7704 LEESBURG PIKE</b>   |                                       | Amount of Each Disbursement this Period<br><b>814.00</b><br><b>Transaction ID : SB17.I6981</b> |
| City <b>FALLS CHURCH</b>  | State <b>VA</b> Zip Code <b>22043</b> |  |
| Purpose of Disbursement<br><b>DATABASE SOFTWARE</b>   | Candidate Name                        | Category/<br>Type  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                                       |  |
| State: District:  |                                       |  |

|   |                                       |   |
|---|---------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. CMDI</b>   |                                       | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 29 / 2013</b>                          |
| Mailing Address <b>7704 LEESBURG PIKE</b>   |                                       | Amount of Each Disbursement this Period<br><b>36.25</b><br><b>Transaction ID : SB17.I6982</b> |
| City <b>FALLS CHURCH</b>  | State <b>VA</b> Zip Code <b>22043</b> |   |
| Purpose of Disbursement<br><b>CREDIT CARD PROCESSING FEES</b>   | Candidate Name                        | Category/<br>Type   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                                       |   |
| State: District:  |                                       |   |

|   |                                       |  |
|---|---------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CMDI</b>   |                                       | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>11 / 04 / 2013</b>                           |
| Mailing Address <b>7704 LEESBURG PIKE</b>   |                                       | Amount of Each Disbursement this Period<br><b>204.26</b><br><b>Transaction ID : SB17.I6983</b> |
| City <b>FALLS CHURCH</b>  | State <b>VA</b> Zip Code <b>22043</b> |  |
| Purpose of Disbursement<br><b>CREDIT CARD PROCESSING FEES</b>   | Candidate Name                        | Category/<br>Type  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |                                       |  |
| State: District:  |                                       |  |

|   |                |
|---|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>1054.51</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |                |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 77 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. CMDI</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>11 / 26 / 2013</b> |
| Mailing Address <b>7704 LEESBURG PIKE</b>   |  | Amount of Each Disbursement this Period<br><b>133.13</b>             |
| City <b>FALLS CHURCH</b>  | State <b>VA</b> Zip Code <b>22043</b>  |  |
| Purpose of Disbursement<br><b>CREDIT CARD PROCESSING FEES</b>   |  | <b>Transaction ID : SB17.I6984</b>                                   |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. CMDI</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>12 / 03 / 2013</b> |
| Mailing Address <b>7704 LEESBURG PIKE</b>   |  | Amount of Each Disbursement this Period<br><b>186.36</b>             |
| City <b>FALLS CHURCH</b>  | State <b>VA</b> Zip Code <b>22043</b>  |  |
| Purpose of Disbursement<br><b>CREDIT CARD PROCESSING FEES</b>   |  | <b>Transaction ID : SB17.I6985</b>                                   |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. CMDI</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>12 / 31 / 2013</b> |
| Mailing Address <b>7704 LEESBURG PIKE</b>   |  | Amount of Each Disbursement this Period<br><b>67.50</b>              |
| City <b>FALLS CHURCH</b>  | State <b>VA</b> Zip Code <b>22043</b>  |  |
| Purpose of Disbursement<br><b>CREDIT CARD PROCESSING FEES</b>   |  | <b>Transaction ID : SB17.I6986</b>                                   |
| Candidate Name  |  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>386.99</b> |
| <b>TOTAL</b> 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:<br>(check only one)          |                                    | PAGE 78 OF 94                       |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial)  
**A. DEPARTMENT OF LABOR AND INDUSTRIES**

Mailing Address PO BOX 44000

City OLYMPIA State WA Zip Code 98504-4000

Purpose of Disbursement INSURANCE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 12 / 2013

Amount of Each Disbursement this Period: 85.96

Transaction ID : SB17.I6995

Full Name (Last, First, Middle Initial)  
**B. HONDA CENTER**

Mailing Address 13291 SE 36TH ST

City BELLEVUE State WA Zip Code 98006-1328

Purpose of Disbursement CAMPAIGN VEHICLE LEASE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 10 / 2013

Amount of Each Disbursement this Period: 502.07

Transaction ID : SB17.I6948

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

Mailing Address 13291 SE 36TH ST

City BELLEVUE State WA Zip Code 98006-1328

Purpose of Disbursement CAMPAIGN VEHICLE LEASE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 08 / 2013

Amount of Each Disbursement this Period: 474.50

Transaction ID : SB17.I6997

**SUBTOTAL** of Disbursements This Page (optional) ..... 1062.53

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

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 79 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. HONDA CENTER</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>12 / 09 / 2013                           |
| Mailing Address 13291 SE 36TH ST   |  | Amount of Each Disbursement this Period<br>502.07<br><b>Transaction ID : SB17.I6998</b> |
| City BELLEVUE State WA Zip Code 98006-1328   | Purpose of Disbursement<br>CAMPAIGN 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)<br><b>B. PAYROLLNW</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 01 / 2013                           |
| Mailing Address 10000 NE 7TH AVE STE 402   |  | Amount of Each Disbursement this Period<br>500.16<br><b>Transaction ID : SB17.I6794</b> |
| City VANCOUVER State WA Zip Code 98685-4548  | Purpose of Disbursement<br>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)<br><b>C. PAYROLLNW</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 09 / 2013                          |
| Mailing Address 10000 NE 7TH AVE STE 402   |  | Amount of Each Disbursement this Period<br>75.90<br><b>Transaction ID : SB17.I6944</b> |
| City VANCOUVER State WA Zip Code 98685-4548  | Purpose of Disbursement<br>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:   |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 1078.13 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 80 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

**A. PAYROLLNW**

Full Name (Last, First, Middle Initial)  
Mailing Address 10000 NE 7TH AVE STE 402

City VANCOUVER State WA Zip Code 98685-4548

Purpose of Disbursement  
PAYROLL TAX

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  
10 / 11 / 2013

Amount of Each Disbursement this Period  
500.16

Transaction ID : SB17.I7034

**B. PAYROLLNW**

Full Name (Last, First, Middle Initial)  
Mailing Address 10000 NE 7TH AVE STE 402

City VANCOUVER State WA Zip Code 98685-4548

Purpose of Disbursement  
PAYROLL TAX

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  
10 / 31 / 2013

Amount of Each Disbursement this Period  
500.16

Transaction ID : SB17.I7035

**C. PAYROLLNW**

Full Name (Last, First, Middle Initial)  
Mailing Address 10000 NE 7TH AVE STE 402

City VANCOUVER State WA Zip Code 98685-4548

Purpose of Disbursement  
PAYROLL PROCESSING FEE

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  
11 / 08 / 2013

Amount of Each Disbursement this Period  
78.20

Transaction ID : SB17.I7036

**SUBTOTAL** of Disbursements This Page (optional)..... 1078.52

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



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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 81 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. PAYROLLNW</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>12 / 09 / 2013</b>                          |
| Mailing Address <b>10000 NE 7TH AVE STE 402</b>  |  | Amount of Each Disbursement this Period<br><b>78.85</b><br><b>Transaction ID : SB17.I7037</b> |
| City <b>VANCOUVER</b> State <b>WA</b> Zip Code <b>98685-4548</b>   | Purpose of Disbursement<br><b>PAYROLL PROCESSING FEE</b>   |   |
| 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)<br><b>B. PAYROLLNW</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>12 / 31 / 2013</b>                           |
| Mailing Address <b>10000 NE 7TH AVE STE 402</b>  |  | Amount of Each Disbursement this Period<br><b>575.04</b><br><b>Transaction ID : SB17.I7038</b> |
| City <b>VANCOUVER</b> State <b>WA</b> Zip Code <b>98685-4548</b>   | Purpose of Disbursement<br><b>PAYROLL TAX</b>  |  |
| 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)<br><b>C. PAYROLLNW</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>11 / 27 / 2013</b>                           |
| Mailing Address <b>10000 NE 7TH AVE STE 402</b>  |  | Amount of Each Disbursement this Period<br><b>575.04</b><br><b>Transaction ID : SB17.I7041</b> |
| City <b>VANCOUVER</b> State <b>WA</b> Zip Code <b>98685-4548</b>   | Purpose of Disbursement<br><b>PAYROLL TAX</b>  |  |
| 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:   |  |  |

|   |                |
|---|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>1228.93</b> |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 82 OF 94 |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. PAYROLLNW</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>12 / 12 / 2013                           |
| Mailing Address 10000 NE 7TH AVE STE 402   |  | Amount of Each Disbursement this Period<br>575.04<br><b>Transaction ID : SB17.I7042</b> |
| City VANCOUVER State WA Zip Code 98685-4548  | Purpose of Disbursement<br>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)<br><b>B. PAYROLLNW</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 14 / 2013                           |
| Mailing Address 10000 NE 7TH AVE STE 402   |  | Amount of Each Disbursement this Period<br>739.32<br><b>Transaction ID : SB17.I7046</b> |
| City VANCOUVER State WA Zip Code 98685-4548  | Purpose of Disbursement<br>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:   |  |   |

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|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. POLITICAL INK, INC.</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 01 / 2013                            |
| Mailing Address 2924 BELLS RD  |  | Amount of Each Disbursement this Period<br>3557.20<br><b>Transaction ID : SB17.I6801</b> |
| City RICHMOND State VA Zip Code 23234-1606   | Purpose of Disbursement<br>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:   |  |  |

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4871.56 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 83 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |   |   |
|--|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. POLITICAL INK, INC.</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>11 / 08 / 2013</b>                            |
| Mailing Address <b>2924 BELLS RD</b>   |   | Amount of Each Disbursement this Period<br><b>2788.98</b><br><b>Transaction ID : SB17.I7006</b> |
| City<br><b>RICHMOND</b>  | State<br><b>VA</b>  |   |
| Zip Code<br><b>23234-1606</b>  | Purpose of Disbursement<br><b>DIRECT MAIL</b>   | Category/<br>Type   |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |   |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |   |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. PROGRESSIVE INSURANCE</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 01 / 2013</b>                           |
| Mailing Address <b>PO BOX 105428</b>   |   | Amount of Each Disbursement this Period<br><b>236.52</b><br><b>Transaction ID : SB17.I6798</b> |
| City<br><b>ATLANTA</b>   | State<br><b>GA</b>  |  |
| Zip Code<br><b>30348-5428</b>  | Purpose of Disbursement<br><b>INSURANCE</b>   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. PROGRESSIVE INSURANCE</b>   |   | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 28 / 2013</b>                           |
| Mailing Address <b>PO BOX 105428</b>   |   | Amount of Each Disbursement this Period<br><b>236.52</b><br><b>Transaction ID : SB17.I7008</b> |
| City<br><b>ATLANTA</b>   | State<br><b>GA</b>  |  |
| Zip Code<br><b>30348-5428</b>  | Purpose of Disbursement<br><b>INSURANCE</b>   | Category/<br>Type  |
| Candidate Name   | Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |  |
| Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | State: District:  |  |

|   |                |
|---|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>3262.02</b> |
| <b>TOTAL</b> 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:<br>(check only one)          | PAGE 84 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

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

Mailing Address PO BOX 105428

City ATLANTA State GA Zip Code 30348-5428

Purpose of Disbursement INSURANCE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 27 / 2013

Amount of Each Disbursement this Period: 236.52

Transaction ID : SB17.I7009

Full Name (Last, First, Middle Initial)  
**B. SPOT ON PRINTING & DESIGN**

Mailing Address 220 106TH AVE NE

City BELLEVUE State WA Zip Code 98004-5728

Purpose of Disbursement PRINTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 01 / 2013

Amount of Each Disbursement this Period: 422.81

Transaction ID : SB17.I7011

Full Name (Last, First, Middle Initial)  
**C. SPOT ON PRINTING & DESIGN**

Mailing Address 220 106TH AVE NE

City BELLEVUE State WA Zip Code 98004-5728

Purpose of Disbursement PRINTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 05 / 2013

Amount of Each Disbursement this Period: 134.93

Transaction ID : SB17.I7012

**SUBTOTAL** of Disbursements This Page (optional)..... 794.26

**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:<br>(check only one)  | PAGE 85 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. THE CATALYST GROUP</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 01 / 2013 |
| Mailing Address 600 PENNSYLVANIA AVE SE STE 330  |  | Amount of Each Disbursement this Period<br>449.70             |
| City WASHINGTON State DC Zip Code 20003-6300   | Purpose of Disbursement FUNDRAISER   |   |
| Candidate Name   | Category/Type  | Transaction ID : SB17.I7014                                   |
| 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:   |  |   |

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|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. GEPPETTO CATERING, INC.</b>                                     |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>09 / 11 / 2013 |
| Mailing Address 4505 QUEENSBURY RD   |  | Amount of Each Disbursement this Period<br>449.70             |
| City RIVERDALE State MD Zip Code 20737   | Purpose of Disbursement EVENT CATERING   |   |
| Candidate Name   | Category/Type  | Transaction ID : SB17.I7054<br>[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:   |  |   |

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|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. THE CATALYST GROUP</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 09 / 2013 |
| Mailing Address 600 PENNSYLVANIA AVE SE STE 330  |  | Amount of Each Disbursement this Period<br>4000.00            |
| City WASHINGTON State DC Zip Code 20003-6300   | Purpose of Disbursement FUNDRAISING CONSULTING   |   |
| Candidate Name   | Category/Type  | Transaction ID : SB17.I7015                                   |
| 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:   |  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4449.70 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 86 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. THE CATALYST GROUP</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 21 / 2013 |
| Mailing Address 600 PENNSYLVANIA AVE SE STE 330  |  | Amount of Each Disbursement this Period<br>482.72             |
| City WASHINGTON State DC Zip Code 20003-6300   | Purpose of Disbursement FUNDRAISER   |   |
| Candidate Name   | Category/Type  | Transaction ID : SB17.I7016                                   |
| 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:   |  |   |

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|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. THE CAPITOL HILL CLUB</b>                                       |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 10 / 2013 |
| Mailing Address 300 1ST ST SE  |  | Amount of Each Disbursement this Period<br>482.72             |
| City WASHINGTON State DC Zip Code 20003-1801   | Purpose of Disbursement EVENT FOOD & BEVERAGE  |   |
| Candidate Name   | Category/Type  | Transaction ID : SB17.I7049<br>[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:   |  |   |

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|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. THE CATALYST GROUP</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 06 / 2013 |
| Mailing Address 600 PENNSYLVANIA AVE SE STE 330  |  | Amount of Each Disbursement this Period<br>4000.00            |
| City WASHINGTON State DC Zip Code 20003-6300   | Purpose of Disbursement FUNDRAISING CONSULTING   |   |
| Candidate Name   | Category/Type  | Transaction ID : SB17.I7017                                   |
| 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:   |  |   |

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|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4482.72 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 87 OF 94 |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. THE CATALYST GROUP</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 12 / 2013                           |
| Mailing Address 600 PENNSYLVANIA AVE SE STE 330  |  | Amount of Each Disbursement this Period<br>226.51<br><b>Transaction ID : SB17.I7018</b> |
| City WASHINGTON State DC Zip Code 20003-6300   | Purpose of Disbursement FUNDRAISER   |   |
| 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:   |  |   |

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|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. GEPPETTO CATERING, INC.</b>                                     |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 29 / 2013   |
| Mailing Address 4505 QUEENSBURY RD   |  | Amount of Each Disbursement this Period<br>226.51<br><b>Transaction ID : SB17.I7050</b><br><b>[MEMO ITEM]</b> |
| City RIVERDALE State MD Zip Code 20737   | Purpose of Disbursement EVENT CATERING   |   |
| 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)<br><b>C. THE CATALYST GROUP</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>12 / 03 / 2013                           |
| Mailing Address 600 PENNSYLVANIA AVE SE STE 330  |  | Amount of Each Disbursement this Period<br>477.25<br><b>Transaction ID : SB17.I7019</b> |
| City WASHINGTON State DC Zip Code 20003-6300   | Purpose of Disbursement FUNDRAISER   |   |
| 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:   |  |   |

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|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 703.76 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 88 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. GEPPETTO CATERING, INC.</b>                                     |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 14 / 2013                      |
| Mailing Address 4505 QUEENSBURY RD   |  | Amount of Each Disbursement this Period<br>4,000.00<br>Transaction ID : SB17.I7051 |
| City RIVERDALE State MD Zip Code 20737   | Purpose of Disbursement<br>EVENT CATERING  |  |
| Candidate Name   | Category/Type  | [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:   |  |  |

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|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. GEPPETTO CATERING, INC.</b>                                     |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>11 / 21 / 2013                    |
| Mailing Address 4505 QUEENSBURY RD   |  | Amount of Each Disbursement this Period<br>274.20<br>Transaction ID : SB17.I7053 |
| City RIVERDALE State MD Zip Code 20737   | Purpose of Disbursement<br>EVENT CATERING  |  |
| Candidate Name   | Category/Type  | [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:   |  |  |

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|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. THE CATALYST GROUP</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>12 / 17 / 2013                     |
| Mailing Address 600 PENNSYLVANIA AVE SE STE 330  |  | Amount of Each Disbursement this Period<br>4000.00<br>Transaction ID : SB17.I7020 |
| City WASHINGTON State DC Zip Code 20003-6300   | Purpose of Disbursement<br>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:   |  |   |

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|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 4000.00 |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 89 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. USPS</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 10 / 2013 |
| Mailing Address 475 LENFANT PLZ SW  |  | Amount of Each Disbursement this Period<br>73.60              |
| City<br>WASHINGTON  | State<br>DC  |   |
| Zip Code<br>20260-0001  | Purpose of Disbursement<br>POSTAGE   | Transaction ID : SB17.I7021                                   |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

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|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. USPS</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 10 / 2013 |
| Mailing Address 475 LENFANT PLZ SW  |  | Amount of Each Disbursement this Period<br>1.92               |
| City<br>WASHINGTON  | State<br>DC  |   |
| Zip Code<br>20260-0001  | Purpose of Disbursement<br>POSTAGE   | Transaction ID : SB17.I7022                                   |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

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|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. USPS</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>10 / 10 / 2013 |
| Mailing Address 475 LENFANT PLZ SW  |  | Amount of Each Disbursement this Period<br>3.84               |
| City<br>WASHINGTON  | State<br>DC  |   |
| Zip Code<br>20260-0001  | Purpose of Disbursement<br>POSTAGE   | Transaction ID : SB17.I7023                                   |
| Candidate Name  | Category/<br>Type  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 79.36 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 90 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. WELLS FARGO</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 01 / 2013</b> |
| Mailing Address <b>PO BOX 6995</b>  |  | Amount of Each Disbursement this Period<br><b>79.45</b>              |
| City<br><b>PORTLAND</b>   | State<br><b>OR</b>   |  |
| Zip Code<br><b>97228-6995</b>   | Purpose of Disbursement<br><b>CREDIT CARD PROCESSING FEES</b>  | <b>Transaction ID : SB17.I7026</b>                                   |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

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|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. WELLS FARGO</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 11 / 2013</b> |
| Mailing Address <b>PO BOX 6995</b>  |  | Amount of Each Disbursement this Period<br><b>39.15</b>              |
| City<br><b>PORTLAND</b>   | State<br><b>OR</b>   |  |
| Zip Code<br><b>97228-6995</b>   | Purpose of Disbursement<br><b>BANK FEE</b>   | <b>Transaction ID : SB17.I7027</b>                                   |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. WELLS FARGO</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>11 / 12 / 2013</b> |
| Mailing Address <b>PO BOX 6995</b>  |  | Amount of Each Disbursement this Period<br><b>23.11</b>              |
| City<br><b>PORTLAND</b>   | State<br><b>OR</b>   |  |
| Zip Code<br><b>97228-6995</b>   | Purpose of Disbursement<br><b>BANK FEE</b>   | <b>Transaction ID : SB17.I7028</b>                                   |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

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| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>141.71</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |               |

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

|   |   |                                    |                                     |                                    |  |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)          | PAGE 91 OF 94                      |                                     |                                    |  |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. WELLS FARGO</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>12 / 11 / 2013</b> |
| Mailing Address <b>PO BOX 6995</b>  |  | Amount of Each Disbursement this Period<br><b>17.72</b>              |
| City <b>PORTLAND</b>  | State <b>OR</b>  |  |
| Zip Code <b>97228-6995</b>  | Purpose of Disbursement<br><b>BANK FEE</b>   | <b>Transaction ID : SB17.I7029</b>                                   |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. KING COUNTY REPUBLICAN PARTY</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 12 / 2013</b> |
| Mailing Address <b>845 106TH AVE NE STE 110</b>   |  | Amount of Each Disbursement this Period<br><b>100.00</b>             |
| City <b>BELLEVUE</b>  | State <b>WA</b>  |  |
| Zip Code <b>98004-4308</b>  | Purpose of Disbursement<br><b>TICKETS TO EVENT</b>   | <b>Transaction ID : SB17.I7002</b>                                   |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>C. WASHINGTON STATE REPUBLICAN PARTY</b>                                    |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>11 / 15 / 2013</b> |
| Mailing Address <b>2840 NORTHUP WAY STE 140</b>   |  | Amount of Each Disbursement this Period<br><b>1250.00</b>            |
| City <b>BELLEVUE</b>  | State <b>WA</b>  |  |
| Zip Code <b>98004-1433</b>  | Purpose of Disbursement<br><b>TICKETS TO EVENT</b>   | <b>Transaction ID : SB17.I7024</b>                                   |
| Candidate Name  | Category/Type  |  |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |  |
| State: District:  |  |  |

|   |                |
|---|----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>1367.72</b> |
| <b>TOTAL</b> 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:<br>(check only one)  | PAGE 92 OF 94 |  |  |  |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |               |  |  |  |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. WASHINGTON STATE REPUBLICAN PARTY</b>                           |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>12 / 03 / 2013</b> |
| Mailing Address <b>2840 NORTHUP WAY STE 140</b>  |  | Amount of Each Disbursement this Period<br><b>200.00</b>             |
| City <b>BELLEVUE</b> State <b>WA</b> Zip Code <b>98004-1433</b>  | Purpose of Disbursement<br><b>TICKETS TO EVENT</b>   |  |
| Candidate Name   | Category/Type  | <b>Transaction ID : SB17.I7025</b>                                   |
| 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)<br><b>B.</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y |
| Mailing Address  |  | Amount of Each Disbursement this Period     |
| City   | State Zip Code   |   |
| Purpose of Disbursement  | Category/Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

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

|   |                 |
|---|-----------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>200.00</b>   |
| <b>TOTAL</b> This Period (last page this line number only)..... | <b>59310.37</b> |

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

|   |                                      |                                    |  |                                    |
|---|--------------------------------------|------------------------------------|--|------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one) |                                    | PAGE 93 OF 94                                  |                                    |
|   | <input type="checkbox"/> 17<br>20a   | <input type="checkbox"/> 18<br>20b | <input checked="" type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. ASH GROVE CEMENT PAC</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br><b>10 / 10 / 2013</b>                            |
| Mailing Address <b>PO BOX 25900</b>  |  | Amount of Each Disbursement this Period<br><b>500.00</b><br><b>Transaction ID : SB20C.I6950</b> |
| City <b>OVERLAND PARK</b> State <b>KS</b> Zip Code <b>66225</b>  | Purpose of Disbursement<br><b>REISSUE REFUND CHECK</b>   |   |
| 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)<br><b>B.</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y |
| Mailing Address  |  | Amount of Each Disbursement this Period     |
| City   | State Zip Code   |   |
| Purpose of Disbursement  | Category/Type  |   |
| Candidate Name   |  |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) |   |
| State: District:   |  |   |

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

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | <b>500.00</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... | <b>500.00</b> |

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

|   |   |               |
|---|---|---------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 94 OF 94 |
|   | <input type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input checked="" type="checkbox"/> 19b<br>21 |               |

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NAME OF COMMITTEE (In Full)  
**Friends of Dave Reichert**

Full Name (Last, First, Middle Initial)  
**A. NATIONAL REPUBLICAN CONGRESSIONAL COMM.**

Mailing Address 320 1ST ST SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement CONTRIBUTION TO COMMITTEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 17 / 2013

Amount of Each Disbursement this Period: 5000.00

Transaction ID : SB21.I7004

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) ..... 5000.00

**TOTAL** This Period (last page this line number only) ..... 5000.00