

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Minnick for Congress

Report Covering the Period:

From:

| | |
|---|---|
| M | M |
| 0 | 4 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

To:

| | |
|---|---|
| M | M |
| 0 | 5 |

| | |
|---|---|
| D | D |
| 0 | 7 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e))..... | 74214.59 | 711446.89 |
| (b) Total Contribution Refunds (from Line 20(d))..... | 0.00 | 1250.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 74214.59 | 710196.89 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17)..... | 121718.86 | 413910.38 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 280.76 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 121718.86 | 413629.62 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 296567.27 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
Minnick for Congress

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 4 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

 To:

| | |
|---|---|
| M | M |
| 0 | 5 |

| | |
|---|---|
| D | D |
| 0 | 7 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|--------------------------------------|---|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | 41510.00 | 522104.13 |
| (i) Itemized (use Schedule A)..... | 17162.00 | 49323.25 |
| (ii) Unitemized..... | 58672.00 | 571427.38 |
| (iii) TOTAL of contributions from individuals..... ▶ | 0.00 | 0.00 |
| (b) Political Party Committees..... | 14000.00 | 29500.00 |
| (c) Other Political Committees (such as PACS)..... | 1542.59 | 110519.51 |
| (d) The Candidate..... | 74214.59 | 711446.89 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)) | | |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES..... | 0.00 | 0.00 |
| 13. LOANS | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 0.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)..... | 0.00 | 280.76 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 74214.59 | 711727.65 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|---------------------------------------|--|
| 17. OPERATING EXPENDITURES..... | 121718.86 | 413910.38 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES..... | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of all Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees..... | 0.00 | 1250.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 1250.00 |
| 21. OTHER DISBURSEMENTS..... | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶ | 121718.86 | 415160.38 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 344071.54 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)..... | 74214.59 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 418286.13 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 121718.86 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 296567.27 |

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 / 96 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | |

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

NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | | |
|---|---|-----------------------|---|
| A. | Full Name (Last, First, Middle Initial) Joan Aaberg | | Date of Receipt MM / DD / YYYY 05 / 07 / 2008 |
| | Mailing Address 21026 NE Interlachen Lane | | Transaction ID: C3875115 |
| | City Fairview | State OR | Zip Code 97024 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| | Name of Employer N/A | Occupation Retired | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | | |

| | | | |
|---|---|-----------------------|---|
| B. | Full Name (Last, First, Middle Initial) Jerry R Asker | | Date of Receipt MM / DD / YYYY 04 / 16 / 2008 |
| | Mailing Address 109 E South 9th | | Transaction ID: C3874290 |
| | City Grangeville | State ID | Zip Code 83530-2147 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 150.00 |
| | Name of Employer Retired | Occupation Retired | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | | |

| | | | |
|---|---|--|---|
| C. | Full Name (Last, First, Middle Initial) Susan Baker | | Date of Receipt MM / DD / YYYY 04 / 14 / 2008 |
| | Mailing Address 3420 Browns Valley Road | | Transaction ID: C3875027 |
| | City Napa | State CA | Zip Code 94558-5429 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 300.00 |
| | Name of Employer Retired | Occupation Administrative Assistant | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 300.00 | | |

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 700.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 96

(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Laura M. Bettis

Mailing Address 1111 N. 9th St.

City State Zip Code
Boise ID 83702

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Laura MC FoundWrightBros Director and Attorney of Couns
Law

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2008

Transaction ID: C3874654

Amount of Each Receipt this Period
250.00

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

B.

Full Name (Last, First, Middle Initial)
Stephen A. Block, Esq.

Mailing Address 1649 9th Street

City State Zip Code
Manhattan Beach CA 90266-6128

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self Investor

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
05 / 01 / 2008

Transaction ID: C3875058

Amount of Each Receipt this Period
2300.00

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

C.

Full Name (Last, First, Middle Initial)
Corey Bordine

Mailing Address 1835 S Rochester Road

City State Zip Code
Rochester Hills MI 48307-3533

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Bordine Nursery LTD Executive VP

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
04 / 01 / 2008

Transaction ID: C3874673

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) 3550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 96
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Carl P Burke, Sr.

Mailing Address 1612 E Braemere Rd

City State Zip Code
Boise ID 83702-1860

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

Name of Employer Greener, Burke & Shoemaker Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 525.00

Date of Receipt
MM / DD / YYYY
04 / 17 / 2008

Transaction ID: C3873867

Amount of Each Receipt this Period
100.00

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

B.

Full Name (Last, First, Middle Initial)
Carl P Burke, Sr.

Mailing Address 1612 E Braemere Rd

City State Zip Code
Boise ID 83702-1860

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

Name of Employer Greener, Burke & Shoemaker Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 525.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2008

Transaction ID: C3873866

Amount of Each Receipt this Period
100.00

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

C.

Full Name (Last, First, Middle Initial)
Philip Burling, Esq.

Mailing Address 1010 Memorial Drive Apt. 8A

City State Zip Code
Cambridge MA 02138-4854

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

Name of Employer Harvard University Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2300.00

Date of Receipt
MM / DD / YYYY
04 / 25 / 2008

Transaction ID: C3875014

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 96

(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Jon Burpee

Mailing Address 1435 Quail Lane

City State Zip Code
Roseburg OR 97470-9251

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt M M / D D / Y Y Y Y
04 / 17 / 2008

Transaction ID: C3874719

Amount of Each Receipt this Period 500.00

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

B.

Full Name (Last, First, Middle Initial)
Joann C Butler

Mailing Address PO Box 639

City State Zip Code
Boise ID 83701-0639

FEC ID number of contributing federal political committee. C

Name of Employer Spink Butler, LLP Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y
05 / 05 / 2008

Transaction ID: C3874754

Amount of Each Receipt this Period 250.00

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

C.

Full Name (Last, First, Middle Initial)
Samuel H Butterfield

Mailing Address 430 Hoeger Ct.

City State Zip Code
Moscow ID 83843

FEC ID number of contributing federal political committee. C

Name of Employer none Occupation not employed

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt M M / D D / Y Y Y Y
04 / 20 / 2008

Transaction ID: C3874224

Amount of Each Receipt this Period 50.00

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

SUBTOTAL of Receipts This Page (optional) 800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 / 96 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | | |
|-----------|---|----------------------------|---|
| A. | Full Name (Last, First, Middle Initial) Samuel H Butterfield | | Date of Receipt MM / DD / YYYY 05 / 07 / 2008 |
| | Mailing Address 430 Hoeger Ct. | | Transaction ID: C3874225 |
| | City Moscow | State ID | Zip Code 83843 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| | Name of Employer none | Occupation not employed | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |

| | | | |
|-----------|---|---------------------|---|
| B. | Full Name (Last, First, Middle Initial) Margaret D Carlson | | Date of Receipt MM / DD / YYYY 04 / 16 / 2008 |
| | Mailing Address 2109 Claremont Drive | | Transaction ID: C3874160 |
| | City Boise | State ID | Zip Code 83702-3014 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| | Name of Employer C&H Equity, LLC | Occupation Owner | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |

| | | | |
|-----------|---|-----------------------|---|
| C. | Full Name (Last, First, Middle Initial) Don E Carroll | | Date of Receipt MM / DD / YYYY 04 / 10 / 2008 |
| | Mailing Address 2790 Linney Road | | Transaction ID: C3874882 |
| | City Bozeman | State MT | Zip Code 59718-7995 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| | Name of Employer Oceanic Time Warner Cable | Occupation Retired | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1600.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: PAGE 10 / 96
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A. Full Name (Last, First, Middle Initial)
Jonathan P Carter

Mailing Address 901 New York Avenue NW
Suite 5100

City Washington State DC Zip Code 20001-4432

FEC ID number of contributing federal political committee. C

Name of Employer CH2M Hill Occupation VP Government Affairs

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 05 / 01 / 2008
Transaction ID: C3874755
 Amount of Each Receipt this Period 500.00

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

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

Mailing Address 2808 N 26th Street

City Boise State ID Zip Code 83702-0313

FEC ID number of contributing federal political committee. C

Name of Employer Hawley Troxell et al Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 277.67

Date of Receipt 04 / 30 / 2008
Transaction ID: C3874575
 Amount of Each Receipt this Period 10.00

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

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

Mailing Address PO Box 1222

City Walla Walla State WA Zip Code 99362-0023

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 04 / 20 / 2008
Transaction ID: C3875029
 Amount of Each Receipt this Period 500.00

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

SUBTOTAL of Receipts This Page (optional) 1010.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 96
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A. Full Name (Last, First, Middle Initial)
Steven A. Clark, Esq.
Mailing Address 1 Main Street
City State Zip Code
Cambridge MA 02142-1531
FEC ID number of contributing federal political committee. **C**
Name of Employer Flynn & Clark Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 700.00
Date of Receipt 04 / 25 / 2008
Transaction ID: C3875060
Amount of Each Receipt this Period 700.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Martha L Cochran
Mailing Address 3800 Fordham Road NW
City State Zip Code
Washington DC 20016-1936
FEC ID number of contributing federal political committee. **C**
Name of Employer Arnold & Porter LLC Occupation Partner, Attorney
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 05 / 01 / 2008
Transaction ID: C3875148
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Steven J Cole
Mailing Address 780 E Highland View Drive
City State Zip Code
Boise ID 83702-1919
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 05 / 05 / 2008
Transaction ID: C3874058
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1200.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 96
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Robert Coleman

Mailing Address 307 Preston Av

City Lewiston State ID Zip Code 83501

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

Name of Employer Coleman Oil Company Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 04 / 29 / 2008

Transaction ID: C3874059

Amount of Each Receipt this Period 1000.00

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

B.

Full Name (Last, First, Middle Initial)
Thomas Cooper

Mailing Address 1299 Pennsylvania Avenue NW Suite 900

City Washington State DC Zip Code 20004-2414

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

Name of Employer General Electric Occupation Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 04 / 25 / 2008

Transaction ID: C3875123

Amount of Each Receipt this Period 500.00

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

C.

Full Name (Last, First, Middle Initial)
Brahm Cramer

Mailing Address 85 Broad Street

City New York State NY Zip Code 10004-2434

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

Name of Employer Goldman Sachs Occupation Banker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 05 / 01 / 2008

Transaction ID: C3875144

Amount of Each Receipt this Period 500.00

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

SUBTOTAL of Receipts This Page (optional) ► 2000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 96
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A. Full Name (Last, First, Middle Initial)
Edwin E. Dahlberg

Mailing Address 420 W Idaho Street

City State Zip Code
Boise ID 83702-6041

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

Name of Employer Occupation
St. Luke's Health System CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 0 8

Transaction ID: C3874170

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Shannon Davis-Jones

Mailing Address 1934 N 18th Street

City State Zip Code
Boise ID 83702-1033

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

Name of Employer Occupation
International Rescue Committee Program Coordinator

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 8

Transaction ID: C3874062

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Albert S Dexter

Mailing Address 4501 West Ninth Avenue

City State Zip Code
Vancouver BC V6R E-2E

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

Name of Employer Occupation
University of British Columbia Professor Emeritus

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 0 8

Transaction ID: C3874884

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 96
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
William R. Drake

Mailing Address 10902 Cruiser Dr.

City State Zip Code
Boise ID 83709

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

Name of Employer Occupation
drakecooper media, marketing firm

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 0 8

Transaction ID: C3874784

Amount of Each Receipt this Period
250.00

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

B.

Full Name (Last, First, Middle Initial)
Buck Drew

Mailing Address PO Box 899

City State Zip Code
Ketchum ID 83340-0899

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

Name of Employer Occupation
Self Dentist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 1 / 2 0 0 8

Transaction ID: C3874879

Amount of Each Receipt this Period
500.00

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

C.

Full Name (Last, First, Middle Initial)
Ronald Eardley

Mailing Address 531 Hearthstone Drive

City State Zip Code
Boise ID 83702-1729

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

Name of Employer Occupation
Jeld-Wen, Inc Sales Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 5 / 2 0 0 8

Transaction ID: C3874641

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 96
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
James S Elder

Mailing Address PO Box 3240

City State Zip Code
Coeur D Alene ID 83816-2508

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 3 / 2 0 0 8

Transaction ID: C3875025

Amount of Each Receipt this Period
500.00

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

B.

Full Name (Last, First, Middle Initial)
Jean Elsaesser

Mailing Address 1871 Sanborn Creek Road

City State Zip Code
Priest River ID 83856-9619

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

Name of Employer Self Employed Occupation CPA

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 0 8

Transaction ID: C3874853

Amount of Each Receipt this Period
1150.00

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

C.

Full Name (Last, First, Middle Initial)
Donald Farley, Esq.

Mailing Address 1718 Shaw Mountain Road

City State Zip Code
Boise ID 83712-6634

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

Name of Employer Hall, Farley, et al Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 8

Transaction ID: C3874068

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **2150.00**

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

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

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

FOR LINE NUMBER: PAGE 16 / 96
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Minnick for Congress

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

Mailing Address 771 W End Avenue
Apt. 8FG

City State Zip Code
New York NY 10025-5572

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

Name of Employer Self Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 07 / 2008

Transaction ID: C3875176

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Jon M Haas

Mailing Address 21 Sunset Road

City State Zip Code
Darien CT 06820-3527

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

Name of Employer Clarion Capital Partners Occupation Private Equity

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 07 / 2008

Transaction ID: C3875182

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 160 Water Street

City State Zip Code
Williamstown MA 01267-3179

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

Name of Employer Village Ventures, Inc. Occupation managing General Partner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
04 / 24 / 2008

Transaction ID: C3874991

Amount of Each Receipt this Period
300.00

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

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 96
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Catherine Henn

Mailing Address 6 Walnut Avenue

City State Zip Code
Cambridge MA 02140-2707

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
04 / 25 / 2008

Transaction ID: C3874734

Amount of Each Receipt this Period
500.00

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

B.

Full Name (Last, First, Middle Initial)
John Henn

Mailing Address 6 Walnut Avenue

City State Zip Code
Cambridge MA 02140-2707

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

Name of Employer Self Employed Occupation Self Employed

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
04 / 25 / 2008

Transaction ID: C3875125

Amount of Each Receipt this Period
250.00

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

C.

Full Name (Last, First, Middle Initial)
Jerry Hughes

Mailing Address PO Box 217

City State Zip Code
Cambridge ID 83610-0217

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

Name of Employer Hughes Float Trips Occupation Outfitter

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
04 / 18 / 2008

Transaction ID: C3873842

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 96
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) Stephen Iorio | | Date of Receipt MM / DD / YYYY 04 / 30 / 2008 |
| Mailing Address 330 W 72nd Street Apt. 11C | | Transaction ID: C3875139 |
| City New York | State NY | Zip Code 10023-2649 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Tishman Speyer | Occupation Real Estate | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

B.

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) John M Isaacson | | Date of Receipt MM / DD / YYYY 04 / 25 / 2008 |
| Mailing Address 81 Washington Avenue | | Transaction ID: C3875124 |
| City Cambridge | State MA | Zip Code 02140-2716 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Isaacson, Miller | Occupation Executive Recruiter | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

C.

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) James M Johnson | | Date of Receipt MM / DD / YYYY 05 / 07 / 2008 |
| Mailing Address 1 Morton Square Apt. 12D | | Transaction ID: C3875180 |
| City New York | State NY | Zip Code 10014-7800 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Woodland Associates | Occupation President | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 96
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

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

Mailing Address 350 N 9th St Ste 202

City State Zip Code
Boise ID 83702-5469

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

Name of Employer Occupation
The Gallatin Group CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1050.00

Date of Receipt
MM / DD / YYYY
05 / 06 / 2008

Transaction ID: C3874998

Amount of Each Receipt this Period
50.00

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

B.

Full Name (Last, First, Middle Initial)
Richard E. Johnson

Mailing Address 1915 N 10th St

City State Zip Code
Boise ID 83702-2704

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

Name of Employer Occupation
Idaho Conservation League Executive Director

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 06 / 2008

Transaction ID: C3874193

Amount of Each Receipt this Period
50.00

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

C.

Full Name (Last, First, Middle Initial)
Melinda Kim

Mailing Address 121 N 9th Street Suite 300

City State Zip Code
Boise ID 83702-5822

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

Name of Employer Occupation
Idaho Street Mortgage Broker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
04 / 18 / 2008

Transaction ID: C3874869

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **350.00**

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

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

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

FOR LINE NUMBER: PAGE 20 / 96
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A. Full Name (Last, First, Middle Initial)
Charles R Knapp
Mailing Address 4086 Hawthorne Way
City State Zip Code
Boise ID 83703-3923
FEC ID number of contributing federal political committee. **C**
Name of Employer Yanke Machine Shop, Inc Occupation Accountant
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 600.00
Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 0 8
Transaction ID: C3874793
Amount of Each Receipt this Period
600.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Kenneth D Lamson
Mailing Address 5044 W Banker Dr
City State Zip Code
Boise ID 83714-9475
FEC ID number of contributing federal political committee. **C**
Name of Employer Idaho Trust Occupation Investment Manager
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 8
Transaction ID: C3874478
Amount of Each Receipt this Period
100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Matthew L Larocco
Mailing Address 555 12th Street NW
City State Zip Code
Washington DC 20004-1200
FEC ID number of contributing federal political committee. **C**
Name of Employer Arnold & Porter, LLP Occupation Sr. Legislative Advisor
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 1 / 2 0 0 8
Transaction ID: C3875149
Amount of Each Receipt this Period
250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 950.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 96
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
J. Frederick Mack

Mailing Address 101 S Capitol Boulevard
Suite 1400

City State Zip Code
Boise ID 83702-7714

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

Name of Employer Occupation
Holland & Hart Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 05 / 2008

Transaction ID: C3874769

Amount of Each Receipt this Period
250.00

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

B.

Full Name (Last, First, Middle Initial)
Tim Mahoney

Mailing Address 243 Wetzel Hollow Lane

City State Zip Code
Maurertown VA 22644-2031

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

Name of Employer Occupation
Tim Mahoney, Inc Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 01 / 2008

Transaction ID: C3875002

Amount of Each Receipt this Period
1000.00

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

C.

Full Name (Last, First, Middle Initial)
Richard Mates

Mailing Address 1537 Dana Avenue

City State Zip Code
Palo Alto CA 94303-2814

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

Name of Employer Occupation
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
04 / 29 / 2008

Transaction ID: C3875035

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 96
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Minnick for Congress

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

Mailing Address 4091 Fairway Drive

City Lewiston State ID Zip Code 83501-9687

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt: 04 / 16 / 2008
Transaction ID: C3874961
 Amount of Each Receipt this Period: 300.00

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

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

Mailing Address 512 Los Nidos Drive

City Santa Fe State NM Zip Code 87501-8356

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

Name of Employer Artist Occupation Gallery Owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt: 04 / 24 / 2008
Transaction ID: C3875095
 Amount of Each Receipt this Period: 250.00

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

C. Full Name (Last, First, Middle Initial)
Ken Miller, Esq.

Mailing Address 63 W 17th Street Apt. 7A

City New York State NY Zip Code 10011-5517

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

Name of Employer CS First Boston Occupation President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt: 05 / 07 / 2008
Transaction ID: C3874928
 Amount of Each Receipt this Period: 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **1550.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 96
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Nicholas G. Miller

Mailing Address PO Box 1617

City State Zip Code
Boise ID 83701-1617

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

Name of Employer
Hawley, Troxell, Ennis, et a

Occupation
Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2008

Transaction ID: C3873890

Amount of Each Receipt this Period
100.00

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

B.

Full Name (Last, First, Middle Initial)
Patricia Millington

Mailing Address 1166 Summit Road

City State Zip Code
Santa Barbara CA 93108-2452

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

Name of Employer
Investor

Occupation
Self

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
MM / DD / YYYY
04 / 28 / 2008

Transaction ID: C3874312

Amount of Each Receipt this Period
250.00

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

C.

Full Name (Last, First, Middle Initial)
Michael P Mitchell

Mailing Address 1916 Gateway Dr

City State Zip Code
Lewiston ID 83501-3988

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

Name of Employer
Retired

Occupation
Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt
MM / DD / YYYY
04 / 01 / 2008

Transaction ID: C3873849

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ► **450.00**

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

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

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

FOR LINE NUMBER: PAGE 25 / 96
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Minnick for Congress

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

Mailing Address 233 S Cleveland Street
Apt. D

City State Zip Code
Moscow ID 83843-3681

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
04 / 17 / 2008

Transaction ID: C3875098

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 233 S Cleveland Street
Apt. D

City State Zip Code
Moscow ID 83843-3681

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
04 / 20 / 2008

Transaction ID: C3875097

Amount of Each Receipt this Period
40.00

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

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

Mailing Address 124 W 60th Street

City State Zip Code
New York NY 10023-7451

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

Name of Employer Polygon Investment Partners Occupation Analyst

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
04 / 30 / 2008

Transaction ID: C3875140

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **540.00**

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 27 / 96 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) Roger P. Parkinson | Date of Receipt MM / DD / YYYY 04 / 21 / 2008 |
| | Mailing Address 5 Sunset Drive | Transaction ID: C3874914 |
| | City State Zip Code Thornwood NY 10594-2005 | Amount of Each Receipt this Period 1000.00 |
| | FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | Name of Employer Retired Occupation Publisher Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|-----------|--|---|
| B. | Full Name (Last, First, Middle Initial) Alexander Polson, II | Date of Receipt MM / DD / YYYY 04 / 25 / 2008 |
| | Mailing Address 3653 SW Dosch Court | Transaction ID: C3875038 |
| | City State Zip Code Portland OR 97221-4135 | Amount of Each Receipt this Period 200.00 |
| | FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | Name of Employer Retired Occupation Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1200.00 | |

| | | |
|-----------|--|---|
| C. | Full Name (Last, First, Middle Initial) Alexander Polson, II | Date of Receipt MM / DD / YYYY 04 / 30 / 2008 |
| | Mailing Address 3653 SW Dosch Court | Transaction ID: C3875039 |
| | City State Zip Code Portland OR 97221-4135 | Amount of Each Receipt this Period 1000.00 |
| | FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | Name of Employer Retired Occupation Retired Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1200.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 2200.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 96
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Adam Rose

Mailing Address PO Box 657

City State Zip Code
Cross River NY 10518-0657

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

Name of Employer Occupation
Rose Associates Real Estate

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
04 / 29 / 2008

Transaction ID: C3875133

Amount of Each Receipt this Period
750.00

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

B.

Full Name (Last, First, Middle Initial)
Ian G Scrivner

Mailing Address 246 E 32nd Street
Apt. 1

City State Zip Code
New York NY 10016-6376

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

Name of Employer Occupation
Sawicki Tanella Architect

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 07 / 2008

Transaction ID: C3875183

Amount of Each Receipt this Period
300.00

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

C.

Full Name (Last, First, Middle Initial)
Steve Skaggs

Mailing Address 702 W Idaho Street
Suite 320

City State Zip Code
Boise ID 83702-8904

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

Name of Employer Occupation
Deloitte & Touche, LLP Accountant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
04 / 01 / 2008

Transaction ID: C3874630

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1550.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 96
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
B. Newal Newal Squyres, Jr.

Mailing Address 1602 N 14th St

City State Zip Code
Boise ID 83702-2601

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

Name of Employer Occupation
Holland & Hart Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
60.00

Transaction ID: C3873857

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

B.

Full Name (Last, First, Middle Initial)
Charles W Stenholm

Mailing Address 616 E St NW
Apt 1154

City State Zip Code
Washington DC 20004-2278

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

Name of Employer Occupation
Olsson, Frank, Weeda PC Sr. Policy Advisor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
500.00

Transaction ID: C3874872

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

C.

Full Name (Last, First, Middle Initial)
Kristian Stiles

Mailing Address 461 Park Avenue S
Floor 9

City State Zip Code
New York NY 10016-6822

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

Name of Employer Occupation
Stiles Partners Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
250.00

Transaction ID: C3874707

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

SUBTOTAL of Receipts This Page (optional) ► **810.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 96
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) Jerry Sturgill | | Date of Receipt MM / DD / YYYY 04 / 16 / 2008 |
| Mailing Address 618 E Highland View Dr | | Transaction ID: C3873821 |
| City Boise | State ID | Zip Code 83702-1917 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer Outlook Capitol | Occupation Managing Director | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1100.00 | |

B.

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) Kathleen Sutherland | | Date of Receipt MM / DD / YYYY 04 / 16 / 2008 |
| Mailing Address 901 Chardie Rd | | Transaction ID: C3874102 |
| City Boise | State ID | Zip Code 83702-1813 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Self | Occupation Pulmonologist | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

C.

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) Bruce L Sweeney | | Date of Receipt MM / DD / YYYY 04 / 01 / 2008 |
| Mailing Address 1021 7th Avenue | | Transaction ID: C3874136 |
| City Lewiston | State ID | Zip Code 83501-2622 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Retired | Occupation Retired | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 850.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 96
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A. Full Name (Last, First, Middle Initial)
Mary J Tate

Mailing Address 1631 E Holly Street

City State Zip Code
Boise ID 83712-8357

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 0 8

Transaction ID: C3874814

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
William H Thomas, Esq.

Mailing Address 225 Summit Ridge Rd

City State Zip Code
Boise ID 83702-2927

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

Name of Employer Information Requested Occupation Information Requested
Thomas, Williams, & Park, LLP Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 5 / 2 0 0 8

Transaction ID: C3875162

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
E. G. Pete Gregory Thompson

Mailing Address PO Box 271

City State Zip Code
Sandpoint ID 83864-0271

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

Name of Employer Information Requested Occupation Information Requested
Retired Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 0 8

Transaction ID: C3874979

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **700.00**

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

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

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

FOR LINE NUMBER: PAGE 32 / 96
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A. Full Name (Last, First, Middle Initial)
Kristen K Troxel

Mailing Address 6101 Airport Rd

City Nampa State ID Zip Code 83687-8567

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

Name of Employer Hewlett Packard Occupation Engineer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 04 / 14 / 2008
Transaction ID: C3874358
 Amount of Each Receipt this Period 250.00

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

B. Full Name (Last, First, Middle Initial)
Scott P Tyre

Mailing Address 22 E Mifflin Street Suite 1010

City Madison State WI Zip Code 53703-4247

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

Name of Employer Capitol Navigators Occupation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 04 / 01 / 2008
Transaction ID: C3874992
 Amount of Each Receipt this Period 1000.00

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

C. Full Name (Last, First, Middle Initial)
L. Cutler Umbach

Mailing Address PO Box 2329

City McCall State ID Zip Code 83638-2329

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

Name of Employer Retired Occupation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 04 / 14 / 2008
Transaction ID: C3874852
 Amount of Each Receipt this Period 500.00

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

SUBTOTAL of Receipts This Page (optional) ► 1750.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 96
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
John M. Vine, Esq.

Mailing Address 1201 Pennsylvania Avenue NW

City Washington State DC Zip Code 20004-2401

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

Name of Employer Covington & Burling Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 04 / 24 / 2008

Transaction ID: C3875063

Amount of Each Receipt this Period 500.00

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

B.

Full Name (Last, First, Middle Initial)
Nancy Wender

Mailing Address 291 Church Street

City New York State NY Zip Code 10013-2403

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

Name of Employer Self Occupation Psychotherapist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 04 / 20 / 2008

Transaction ID: C3875101

Amount of Each Receipt this Period 1000.00

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

C.

Full Name (Last, First, Middle Initial)
Steven Winch

Mailing Address 10 E 29th Street Apt. 38G

City New York State NY Zip Code 10016-7444

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 04 / 10 / 2008

Transaction ID: C3875056

Amount of Each Receipt this Period 500.00

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

SUBTOTAL of Receipts This Page (optional) ► 2000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 96
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A. Full Name (Last, First, Middle Initial)
Edward E Zimmer

Mailing Address 2244 N Longview Pl

City State Zip Code
Boise ID 83702-1295

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

Name of Employer Occupation
ECCO Group CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 1 / 2 0 0 8

Transaction ID: C3873805

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Seven Land Associates

Mailing Address 22536 Ford Road

City State Zip Code
Dearborn Heights MI 48127-2423

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 3 / 2 0 0 8

Transaction ID: C3875065

Amount of Each Receipt this Period
250.00

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

PARTNERSHIP--partners below if itemized

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

Mailing Address 11 Bellingham Road

City State Zip Code
Chestnut Hill MA 02467-3229

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

Name of Employer Occupation
City of Newton Teacher

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 8

Transaction ID: C3875102A

Amount of Each Receipt this Period
1000.00

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

* Earmarked Contribution:
See Below

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 96
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

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

Mailing Address PO Box 390728

City State Zip Code
Cambridge MA 02139-0008

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

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 0 8

Transaction ID: C3875102AB

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) | 0.00 |
| TOTAL This Period (last page this line number only) | 41510.00 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 96
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)
Minnick for Congress

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

Mailing Address 499 S. CAPITOL ST. S.W. #414
--

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00271338

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2008

Transaction ID: C3874508

Amount of Each Receipt this Period
5000.00

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

B. Full Name (Last, First, Middle Initial)
Cap-Pac Separate Segregated Fund Of National Commu

Mailing Address 810 FIRST STREET NE - SUITE 530

City State Zip Code
WASHINGTON DC 20002

FEC ID number of contributing federal political committee. **C** C00163048

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2008

Transaction ID: C3875147

Amount of Each Receipt this Period
1500.00

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

C. Full Name (Last, First, Middle Initial)
The Committee For A Livable Future

Mailing Address 830 NE Holladay Street
Room 105

City State Zip Code
Portland OR 97232

FEC ID number of contributing federal political committee. **C** C00323352

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2008

Transaction ID: C3875150

Amount of Each Receipt this Period
2500.00

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

SUBTOTAL of Receipts This Page (optional) ► **9000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 96
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
United Transportation Union Political Action Commi

Mailing Address 14600 Detroit Ave

City Cleveland State OH Zip Code 44107

FEC ID number of contributing federal political committee. **C** C00001636

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2008

Transaction ID: C3874935

Amount of Each Receipt this Period
5000.00

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

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) | 5000.00 |
| TOTAL This Period (last page this line number only) | 14000.00 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 96
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A. Full Name (Last, First, Middle Initial)
Walt C Minnick

Mailing Address 12578 N. Schicks Ridge Road

City State Zip Code
Boise ID 83714

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

Name of Employer Occupation
Summerwinds Garden Centers Chairman of the Board

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

110519.51

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: C3873917

Amount of Each Receipt this Period
385.00

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

* In-Kind:

B. Full Name (Last, First, Middle Initial)
Walt C Minnick

Mailing Address 12578 N. Schicks Ridge Road

City State Zip Code
Boise ID 83714

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

Name of Employer Occupation
Summerwinds Garden Centers Chairman of the Board

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

110519.51

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 0 8

Transaction ID: C3873918

Amount of Each Receipt this Period
23.74

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

* In-Kind:

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

Mailing Address 12578 N. Schicks Ridge Road

City State Zip Code
Boise ID 83714

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

Name of Employer Occupation
Summerwinds Garden Centers Chairman of the Board

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

110519.51

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 8

Transaction ID: C3873920

Amount of Each Receipt this Period
9.60

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

* In-Kind:

SUBTOTAL of Receipts This Page (optional) ► **418.34**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 96
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A. Full Name (Last, First, Middle Initial)
Walt C Minnick

Mailing Address 12578 N. Schicks Ridge Road

City State Zip Code
Boise ID 83714

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

Name of Employer Occupation
Summerwinds Garden Centers Chairman of the Board

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

110519.51

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 9 / 2 0 0 8

Transaction ID: C3873919

Amount of Each Receipt this Period
9.94

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

* In-Kind:

B. Full Name (Last, First, Middle Initial)
Walt C Minnick

Mailing Address 12578 N. Schicks Ridge Road

City State Zip Code
Boise ID 83714

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

Name of Employer Occupation
Summerwinds Garden Centers Chairman of the Board

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

110519.51

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 8

Transaction ID: C3873904

Amount of Each Receipt this Period
1.40

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

* In-Kind:

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

Mailing Address 12578 N. Schicks Ridge Road

City State Zip Code
Boise ID 83714

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

Name of Employer Occupation
Summerwinds Garden Centers Chairman of the Board

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

110519.51

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 8

Transaction ID: C3873905

Amount of Each Receipt this Period
18.20

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

* In-Kind:

SUBTOTAL of Receipts This Page (optional) ► **29.54**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 96
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Walt C Minnick

Mailing Address 12578 N. Schicks Ridge Road

City State Zip Code
Boise ID 83714

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

Name of Employer Summerwinds Garden Centers Occupation Chairman of the Board

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

110519.51

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 8

Transaction ID: C3873906

Amount of Each Receipt this Period
141.84

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

* In-Kind:

B.

Full Name (Last, First, Middle Initial)
Walt C Minnick

Mailing Address 12578 N. Schicks Ridge Road

City State Zip Code
Boise ID 83714

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

Name of Employer Summerwinds Garden Centers Occupation Chairman of the Board

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

110519.51

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 8

Transaction ID: C3873907

Amount of Each Receipt this Period
60.00

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

* In-Kind:

C.

Full Name (Last, First, Middle Initial)
Walt C Minnick

Mailing Address 12578 N. Schicks Ridge Road

City State Zip Code
Boise ID 83714

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

Name of Employer Summerwinds Garden Centers Occupation Chairman of the Board

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

110519.51

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 8

Transaction ID: C3873923

Amount of Each Receipt this Period
45.00

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

* In-Kind:

SUBTOTAL of Receipts This Page (optional) ► **246.84**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 96
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A. Full Name (Last, First, Middle Initial)
Walt C Minnick

Mailing Address 12578 N. Schicks Ridge Road

City State Zip Code
Boise ID 83714

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

Name of Employer Summerwinds Garden Centers Occupation Chairman of the Board

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
1.89

Transaction ID: C3873945

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

* In-Kind:

B. Full Name (Last, First, Middle Initial)
Walt C Minnick

Mailing Address 12578 N. Schicks Ridge Road

City State Zip Code
Boise ID 83714

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

Name of Employer Summerwinds Garden Centers Occupation Chairman of the Board

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
22.00

Transaction ID: C3873909

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

* In-Kind:

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

Mailing Address 12578 N. Schicks Ridge Road

City State Zip Code
Boise ID 83714

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

Name of Employer Summerwinds Garden Centers Occupation Chairman of the Board

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
32.00

Transaction ID: C3873913

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

* In-Kind:

SUBTOTAL of Receipts This Page (optional) ► **55.89**

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

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

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

FOR LINE NUMBER: PAGE 42 / 96
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A. Full Name (Last, First, Middle Initial)
Walt C Minnick
Mailing Address 12578 N. Schicks Ridge Road
City State Zip Code
Boise ID 83714
FEC ID number of contributing federal political committee. **C**
Name of Employer Summerwinds Garden Centers Occupation Chairman of the Board
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 110519.51
Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 2 / 2 0 0 8
Transaction ID: C3873910
Amount of Each Receipt this Period
60.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind:

B. Full Name (Last, First, Middle Initial)
Walt C Minnick
Mailing Address 12578 N. Schicks Ridge Road
City State Zip Code
Boise ID 83714
FEC ID number of contributing federal political committee. **C**
Name of Employer Summerwinds Garden Centers Occupation Chairman of the Board
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 110519.51
Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 2 / 2 0 0 8
Transaction ID: C3873921
Amount of Each Receipt this Period
43.17
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind:

C. Full Name (Last, First, Middle Initial)
Walt C Minnick
Mailing Address 12578 N. Schicks Ridge Road
City State Zip Code
Boise ID 83714
FEC ID number of contributing federal political committee. **C**
Name of Employer Summerwinds Garden Centers Occupation Chairman of the Board
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 110519.51
Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 8
Transaction ID: C3873911
Amount of Each Receipt this Period
35.75
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind:

SUBTOTAL of Receipts This Page (optional) ► 138.92
TOTAL This Period (last page this line number only) ►

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 43 / 96 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|-----------|---|---|
| A. | Full Name (Last, First, Middle Initial) Walt C Minnick | Date of Receipt MM / DD / YYYY 04 / 23 / 2008 |
| | Mailing Address 12578 N. Schicks Ridge Road | Transaction ID: C3873922 |
| | City State Zip Code Boise ID 83714 | Amount of Each Receipt this Period 515.25 |
| | FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | Name of Employer Summerwinds Garden Centers Occupation Chairman of the Board Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 110519.51 | * In-Kind: |

| | | |
|-----------|---|---|
| B. | Full Name (Last, First, Middle Initial) Walt C Minnick | Date of Receipt MM / DD / YYYY 04 / 24 / 2008 |
| | Mailing Address 12578 N. Schicks Ridge Road | Transaction ID: C3873914 |
| | City State Zip Code Boise ID 83714 | Amount of Each Receipt this Period 55.00 |
| | FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | Name of Employer Summerwinds Garden Centers Occupation Chairman of the Board Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 110519.51 | * In-Kind: |

| | | |
|-----------|---|---|
| C. | Full Name (Last, First, Middle Initial) Walt C Minnick | Date of Receipt MM / DD / YYYY 04 / 25 / 2008 |
| | Mailing Address 12578 N. Schicks Ridge Road | Transaction ID: C3873912 |
| | City State Zip Code Boise ID 83714 | Amount of Each Receipt this Period 14.61 |
| | FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | Name of Employer Summerwinds Garden Centers Occupation Chairman of the Board Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 110519.51 | * In-Kind: |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 584.86 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 44 / 96 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 11d | |
| | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|-----------|---|---|
| A. | Full Name (Last, First, Middle Initial) Walt C Minnick | Date of Receipt MM / DD / YYYY 04 / 25 / 2008 |
| | Mailing Address 12578 N. Schicks Ridge Road | Transaction ID: C3873915 |
| | City State Zip Code Boise ID 83714 | Amount of Each Receipt this Period 50.00 |
| | FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | Name of Employer Summerwinds Garden Centers Occupation Chairman of the Board Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 110519.51 | * In-Kind: |

| | | |
|-----------|---|---|
| B. | Full Name (Last, First, Middle Initial) Walt C Minnick | Date of Receipt MM / DD / YYYY 04 / 25 / 2008 |
| | Mailing Address 12578 N. Schicks Ridge Road | Transaction ID: C3873916 |
| | City State Zip Code Boise ID 83714 | Amount of Each Receipt this Period 10.00 |
| | FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | Name of Employer Summerwinds Garden Centers Occupation Chairman of the Board Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 110519.51 | * In-Kind: |

| | | |
|-----------|---|---|
| C. | Full Name (Last, First, Middle Initial) Walt C Minnick | Date of Receipt MM / DD / YYYY 05 / 07 / 2008 |
| | Mailing Address 12578 N. Schicks Ridge Road | Transaction ID: C3956224 |
| | City State Zip Code Boise ID 83714 | Amount of Each Receipt this Period 8.20 |
| | FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| | Name of Employer Summerwinds Garden Centers Occupation Chairman of the Board Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 110519.51 | * In-Kind: Food during travel |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 68.20 |
| TOTAL This Period (last page this line number only) | 1542.59 |

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)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) Alaska Airlines | Transaction ID: D176428 |
| | Mailing Address PO Box 68900 | Date of Disbursement 04 / 29 / 2008 |
| | City Seattle State WA Zip Code 98168-0900 | Amount of Each Disbursement this Period 120.50 |
| | Purpose of Disbursement Travel - Airfare | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/Type 003 |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| | State: District: | |

| | | |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial) Alaska Airlines | Transaction ID: D176429 |
| | Mailing Address PO Box 68900 | Date of Disbursement 04 / 17 / 2008 |
| | City Seattle State WA Zip Code 98168-0900 | Amount of Each Disbursement this Period 119.50 |
| | Purpose of Disbursement Travel - Airfare | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/Type 003 |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| | State: District: | |

| | | |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial) Alaska Airlines | Transaction ID: D176430 |
| | Mailing Address PO Box 68900 | Date of Disbursement 04 / 17 / 2008 |
| | City Seattle State WA Zip Code 98168-0900 | Amount of Each Disbursement this Period 119.50 |
| | Purpose of Disbursement travel - Airfare | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/Type 003 |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| | State: District: | |

| | |
|--|---------------|
| SUBTOTAL of Disbursements This Page (optional) | 359.50 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) Alaska Airlines | Transaction ID: D176436 |
| | Mailing Address PO Box 68900 | Date of Disbursement 04 / 19 / 2008 |
| | City Seattle State WA Zip Code 98168-0900 | Amount of Each Disbursement this Period 235.50 |
| | Purpose of Disbursement Travel - Airfare | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/Type 003 |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| | State: District: | |

| | | |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial) Alaska Airlines | Transaction ID: D176437 |
| | Mailing Address PO Box 68900 | Date of Disbursement 04 / 17 / 2008 |
| | City Seattle State WA Zip Code 98168-0900 | Amount of Each Disbursement this Period 39.50 |
| | Purpose of Disbursement Travel - Airfare | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/Type 003 |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| | State: District: | |

| | | |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial) Alaska Airlines | Transaction ID: D176438 |
| | Mailing Address PO Box 68900 | Date of Disbursement 04 / 19 / 2008 |
| | City Seattle State WA Zip Code 98168-0900 | Amount of Each Disbursement this Period 109.00 |
| | Purpose of Disbursement travel - Airfare | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/Type 003 |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| | State: District: | |

| | |
|--|---------------|
| SUBTOTAL of Disbursements This Page (optional) | 384.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Alaska Airlines | Transaction ID: D176439 Date of Disbursement 04 / 17 / 2008 |
| | Mailing Address PO Box 68900 | Amount of Each Disbursement this Period 119.50 |
| | City Seattle State WA Zip Code 98168-0900 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Travel - Airfare Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 003 Category/Type |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Albertsons | Transaction ID: D176603 Date of Disbursement 04 / 09 / 2008 |
| | Mailing Address 10387 W Fairview Avenue | Amount of Each Disbursement this Period 36.80 |
| | City Boise State ID Zip Code 83704-8014 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Food Beverages Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 001 Category/Type |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Albertsons | Transaction ID: D176604 Date of Disbursement 04 / 10 / 2008 |
| | Mailing Address 10387 W Fairview Avenue | Amount of Each Disbursement this Period 4.60 |
| | City Boise State ID Zip Code 83704-8014 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Food Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 001 Category/Type |

| | | |
|--|---|--------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 160.90 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|-----------|--|--|
| A. | Full Name (Last, First, Middle Initial) Albertsons <hr/> Mailing Address 10387 W Fairview Avenue <hr/> City Boise State ID Zip Code 83704-8014 <hr/> Purpose of Disbursement Food Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D176612 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 19.24 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| B. | Full Name (Last, First, Middle Initial) AMS Communications, Inc. <hr/> Mailing Address 500 Sansome Street Suite 201 <hr/> City San Francisco State CA Zip Code 94111-3215 <hr/> Purpose of Disbursement Printing Minnick Walk Piece Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D176941 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 8700.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| C. | Full Name (Last, First, Middle Initial) Mrs. Lisa Anderson <hr/> Mailing Address 814 W Trine Loop <hr/> City Nampa State ID Zip Code 83686-8779 <hr/> Purpose of Disbursement Finance Administration Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D176947 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 625.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | |
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| SUBTOTAL of Disbursements This Page (optional) ▶ | 9344.24 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

**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)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Mrs. Lisa Anderson | Transaction ID: D176948 Date of Disbursement 04 / 30 / 2008 |
| | Mailing Address 814 W Trine Loop | Amount of Each Disbursement this Period 1250.00 |
| | City Nampa State ID ID Zip Code 83686-8779 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Contract Labor Finance Assistance Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 001 Category/Type |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Auburn Quad, Inc | Transaction ID: D176923 Date of Disbursement 04 / 30 / 2008 |
| | Mailing Address PO Box 390728 | Amount of Each Disbursement this Period 71.51 |
| | City Cambridge State MA Zip Code 02139-0008 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Processing Fees Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 003 Category/Type |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) AutoSort | Transaction ID: D176810 Date of Disbursement 04 / 09 / 2008 |
| | Mailing Address 7286 W Airway Court | Amount of Each Disbursement this Period 515.00 |
| | City Boise State ID ID Zip Code 83709-2886 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Mailhouse Service Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 003 Category/Type |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 1836.51 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|---|---|
| A. | Full Name (Last, First, Middle Initial) AutoSort Mailing Address 7286 W Airway Court City Boise State ID Zip Code 83709-2886 Purpose of Disbursement Mailhouse Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D176811 Date of Disbursement 04 / 15 / 2008 Amount of Each Disbursement this Period 117.29 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| B. | Full Name (Last, First, Middle Initial) AutoSort Mailing Address 7286 W Airway Court City Boise State ID Zip Code 83709-2886 Purpose of Disbursement Mailhouse Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D176813 Date of Disbursement 04 / 01 / 2008 Amount of Each Disbursement this Period 62.81 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| C. | Full Name (Last, First, Middle Initial) Best Western University Inn Mailing Address 1516 West Pullman Road City Moscow State ID Zip Code 83843 Purpose of Disbursement Food for Event Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D194653 Date of Disbursement 04 / 17 / 2008 Amount of Each Disbursement this Period 381.57 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

SUBTOTAL of Disbursements This Page (optional) ▶

561.67

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Biz Print

Mailing Address 600 W Front Street

City Boise State ID Zip Code 83702-7233

Purpose of Disbursement
Mailhouse
Candidate Name

003
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D176953
Date of Disbursement

04 / 29 / 2008

Amount of Each Disbursement this Period

1402.47

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

B.

Full Name (Last, First, Middle Initial)
Biz Print

Mailing Address 600 W Front Street

City Boise State ID Zip Code 83702-7233

Purpose of Disbursement
Mailhouse
Candidate Name

003
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D176954
Date of Disbursement

04 / 20 / 2008

Amount of Each Disbursement this Period

247.77

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

C.

Full Name (Last, First, Middle Initial)
Campaign Communication Solutions, Inc.

Mailing Address 121 S Palm Canyon Drive Suite 205

City Palm Springs State CA Zip Code 92262-6350

Purpose of Disbursement
Phone Calls:Voter Identification
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D176856
Date of Disbursement

04 / 03 / 2008

Amount of Each Disbursement this Period

24221.40

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

SUBTOTAL of Disbursements This Page (optional) ▶

25871.64

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | |
|--|---|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Cole Village Chevron</p> <p>Mailing Address 3203 N Cole Road</p> <p>City Boise State ID CA Zip Code 83704-4402</p> <p>Purpose of Disbursement Gas Subsidy Event</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p>Transaction ID: D177039</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4"/> <input type="text" value="2"/> <input type="text" value="5"/> <input type="text" value="9"/> <input type="text" value="7"/> <input type="text" value="0"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) Complete Campaigns</p> <p>Mailing Address 601 Gateway Center Way Suite K</p> <p>City San Diego State ID CA Zip Code 92102-4537</p> <p>Purpose of Disbursement Monthly Database Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p>Transaction ID: D192226</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Complete Campaigns</p> <p>Mailing Address 601 Gateway Center Way Suite K</p> <p>City San Diego State ID CA Zip Code 92102-4537</p> <p>Purpose of Disbursement Monthly Database Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p>Transaction ID: D176267</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |

| | |
|---|--|
| <p>SUBTOTAL of Disbursements This Page (optional)</p> | <p><input type="text" value="5"/> <input type="text" value="2"/> <input type="text" value="5"/> <input type="text" value="9"/> <input type="text" value="7"/> <input type="text" value="0"/></p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p><input type="text" value="5"/> <input type="text" value="2"/> <input type="text" value="5"/> <input type="text" value="9"/> <input type="text" value="7"/> <input type="text" value="0"/></p> |

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)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | |
|---|---|
| <p>A. Full Name (Last, First, Middle Initial) Complete Campaigns</p> <p>Mailing Address 601 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4537</p> <p>Purpose of Disbursement Transaction Processing Fees Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D176276 Date of Disbursement 04 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 131.30</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>B. Full Name (Last, First, Middle Initial) Cricket</p> <p>Mailing Address PO Box 349067</p> <p>City Columbus State OH Zip Code 43234-9067</p> <p>Purpose of Disbursement Mobile Phones Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D176488 Date of Disbursement 04 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 407.20</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>C. Full Name (Last, First, Middle Initial) FedEx Kinko's</p> <p>Mailing Address 691 S Capitol Boulevard</p> <p>City Boise State ID Zip Code 83702-7121</p> <p>Purpose of Disbursement Copies Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D176369 Date of Disbursement 04 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 11.76</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

550.26

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: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial) Fisher's Document Systems Mailing Address 575 E 42nd Street City Boise State ID Zip Code 83714-6322 Purpose of Disbursement Copier Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D176820 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 8 Amount of Each Disbursement this Period 356.52 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| B. | Full Name (Last, First, Middle Initial) Glenn Rummier Mailing Address 807 Ada Street City Boise State ID Zip Code 83702-3654 Purpose of Disbursement Internet Design Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D176945 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 8 Amount of Each Disbursement this Period 675.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| C. | Full Name (Last, First, Middle Initial) Hildebrand Tewes Consulting Mailing Address 1726 M Street NW City Washington State DC Zip Code 20036-4502 Purpose of Disbursement Research Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D176513 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 8 Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

SUBTOTAL of Disbursements This Page (optional) ▶

6031.52

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: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|---|---|
| A. | Full Name (Last, First, Middle Initial) iPlan Inc. Mailing Address 1770 W State Street City Boise State ID Zip Code 83702-3923 Purpose of Disbursement Web Site Support Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D176658 Date of Disbursement 04 / 01 / 2008 Amount of Each Disbursement this Period 145.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| B. | Full Name (Last, First, Middle Initial) iPlan Inc. Mailing Address 1770 W State Street City Boise State ID Zip Code 83702-3923 Purpose of Disbursement Internet Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D176659 Date of Disbursement 05 / 01 / 2008 Amount of Each Disbursement this Period 44.85 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| C. | Full Name (Last, First, Middle Initial) Kootenai County Democrats Mailing Address 1124 E Sherman Avenue City Coeur D Alene State ID Zip Code 83814-4171 Purpose of Disbursement Event Tickets Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: D176639 Date of Disbursement 04 / 09 / 2008 Amount of Each Disbursement this Period 226.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

SUBTOTAL of Disbursements This Page (optional) ▶

416.45

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) Kootenai County Democrats</p> <p>Mailing Address 1124 E Sherman Avenue</p> <p>City Coeur D Alene State ID Zip Code 83814-4171</p> <p>Purpose of Disbursement KCDD Tickets to Reception</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D176642 Date of Disbursement 05 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>B. Full Name (Last, First, Middle Initial) Office Networks</p> <p>Mailing Address 2526 S Yankee Place</p> <p>City Boise State ID Zip Code 83709-8015</p> <p>Purpose of Disbursement Network Service Contract Payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D176586 Date of Disbursement 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>C. Full Name (Last, First, Middle Initial) Office Networks</p> <p>Mailing Address 2526 S Yankee Place</p> <p>City Boise State ID Zip Code 83709-8015</p> <p>Purpose of Disbursement Network IT Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D176591 Date of Disbursement 04 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 1140.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |

SUBTOTAL of Disbursements This Page (optional) ►

2240.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | |
|---|--|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Owyhee Plaza</p> <p>Mailing Address 1109 W Main Street</p> <p>City Boise State ID Zip Code 83702-5649</p> <p>Purpose of Disbursement Travel - Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p>Transaction ID: D176997</p> <p>Date of Disbursement 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 1407.98</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) Owyhee Plaza</p> <p>Mailing Address 1109 W Main Street</p> <p>City Boise State ID Zip Code 83702-5649</p> <p>Purpose of Disbursement Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p>Transaction ID: D192249</p> <p>Date of Disbursement 05 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 239.68</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) PayChex</p> <p>Mailing Address 10757 River Front Parkway Suite 200</p> <p>City South Jordan State UT Zip Code 84095-3552</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p>Transaction ID: D176684</p> <p>Date of Disbursement 04 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 4412.17</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

6059.83

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
PayChex

Transaction ID: D176685
Date of Disbursement

Mailing Address 10757 River Front Parkway
Suite 200

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 3 | 0 | | 2 | 0 | 0 | 8 |

City South Jordan State UT Zip Code 84095-3552

Amount of Each Disbursement this Period

| |
|--------|
| 167.64 |
|--------|

Purpose of Disbursement
Payroll Processing Fees

| |
|-----|
| 001 |
|-----|

Category/
Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
PayChex

Transaction ID: D176686
Date of Disbursement

Mailing Address 10757 River Front Parkway
Suite 200

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 5 | | 2 | 0 | 0 | 8 |

City South Jordan State UT Zip Code 84095-3552

Amount of Each Disbursement this Period

| |
|---------|
| 4983.81 |
|---------|

Purpose of Disbursement
Payroll Taxes

| |
|-----|
| 001 |
|-----|

Category/
Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
PayChex

Transaction ID: D176689
Date of Disbursement

Mailing Address 10757 River Front Parkway
Suite 200

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 0 | | 2 | 0 | 0 | 8 |

City South Jordan State UT Zip Code 84095-3552

Amount of Each Disbursement this Period

| |
|--------|
| 160.44 |
|--------|

Purpose of Disbursement
Payroll Processing Fee

| |
|-----|
| 001 |
|-----|

Category/
Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

| |
|---------|
| 5311.89 |
|---------|

TOTAL This Period (last page this line number only)

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| |
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**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)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) Powell Phones LLC | Transaction ID: D176802 Date of Disbursement 04 / 16 / 2008 |
| | Mailing Address c/o Don Powell 607 NW 22nd Avenue | Amount of Each Disbursement this Period 104.56 |
| | City Portland State OR Zip Code 97210 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Event | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| | State: District: | |

| | | |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial) Powell Phones LLC | Transaction ID: D176803 Date of Disbursement 04 / 18 / 2008 |
| | Mailing Address c/o Don Powell 607 NW 22nd Avenue | Amount of Each Disbursement this Period 225.84 |
| | City Portland State OR Zip Code 97210 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Event | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| | State: District: | |

| | | |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial) Powell Phones LLC | Transaction ID: D176804 Date of Disbursement 05 / 07 / 2008 |
| | Mailing Address c/o Don Powell 607 NW 22nd Avenue | Amount of Each Disbursement this Period 120.88 |
| | City Portland State OR Zip Code 97210 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Event | 001 Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| | State: District: | |

| | |
|--|---------------|
| SUBTOTAL of Disbursements This Page (optional) | 451.28 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | |
|--|---|
| <p>A. Full Name (Last, First, Middle Initial) PR Promotions</p> <p>Mailing Address PO Box 34407</p> <p>City Bethesda State MD Zip Code 20827-0407</p> <p>Purpose of Disbursement Shipping Lapel Stickers Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D176840 Date of Disbursement 04 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 11.90</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>B. Full Name (Last, First, Middle Initial) Printworks Company</p> <p>Mailing Address 650 E State Street Suite A</p> <p>City Eagle State ID Zip Code 83616-6072</p> <p>Purpose of Disbursement Stickers Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D192228 Date of Disbursement 04 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 297.16</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>C. Full Name (Last, First, Middle Initial) QwestComm</p> <p>Mailing Address PO Box 17363</p> <p>City Denver State CO Zip Code 80217-0363</p> <p>Purpose of Disbursement Office Phone Service Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D176644 Date of Disbursement 04 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 416.73</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

725.79

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) QwestComm | Transaction ID: D176645 Date of Disbursement 04 / 22 / 2008 |
| | Mailing Address PO Box 17363 | Amount of Each Disbursement this Period 298.18 |
| | City Denver State CO Zip Code 80217-0363 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Office Phone Service Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 001 Category/Type |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) QwestComm | Transaction ID: D176650 Date of Disbursement 05 / 07 / 2008 |
| | Mailing Address PO Box 17363 | Amount of Each Disbursement this Period 427.67 |
| | City Denver State CO Zip Code 80217-0363 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Office Phone Service Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 001 Category/Type |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Red Lion Inn -- Lewiston | Transaction ID: D176855 Date of Disbursement 04 / 01 / 2008 |
| | Mailing Address 621 21st Street | Amount of Each Disbursement this Period 623.33 |
| | City Lewiston State ID Zip Code 83501-3285 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Food for Event Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 002 Category/Type |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 1349.18 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Shirt Stock | Transaction ID: D176991 Date of Disbursement 05 / 03 / 2008 |
| | Mailing Address 8425 Valley View Drive | Amount of Each Disbursement this Period 531.06 |
| | City Boise State ID Zip Code 83704-4474 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Campaign T-shirts Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 001 Category/Type |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Staples | Transaction ID: D176325 Date of Disbursement 04 / 10 / 2008 |
| | Mailing Address 8059 Preece Drive | Amount of Each Disbursement this Period 18.19 |
| | City Boise State ID Zip Code 83704-9052 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Office Supplies Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 001 Category/Type |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Staples | Transaction ID: D176326 Date of Disbursement 04 / 14 / 2008 |
| | Mailing Address 8059 Preece Drive | Amount of Each Disbursement this Period 111.59 |
| | City Boise State ID Zip Code 83704-9052 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Office Supplies Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 001 Category/Type |

| | |
|--|---------------|
| SUBTOTAL of Disbursements This Page (optional) | 660.84 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Staples | Transaction ID: D176327 Date of Disbursement 05 / 01 / 2008 |
| | Mailing Address 8059 Preece Drive | Amount of Each Disbursement this Period 269.71 |
| | City Boise State ID Zip Code 83704-9052 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Office Supplies Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 001 Category/Type |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Staples | Transaction ID: D176328 Date of Disbursement 04 / 08 / 2008 |
| | Mailing Address 8059 Preece Drive | Amount of Each Disbursement this Period 131.45 |
| | City Boise State ID Zip Code 83704-9052 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Office Supplies Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 001 Category/Type |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Stiles Partners, LLC | Transaction ID: D176660 Date of Disbursement 04 / 08 / 2008 |
| | Mailing Address 461 Park Avenue S Floor 9 | Amount of Each Disbursement this Period 10000.00 |
| | City New York State NY Zip Code 10016-6822 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Fundraising Consulting Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 003 Category/Type |

| | | |
|--|---|----------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 10401.16 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) Stiles Partners, LLC</p> <p>Mailing Address 461 Park Avenue S Floor 9</p> <p>City New York State NY Zip Code 10016-6822</p> <p>Purpose of Disbursement Fundraising Consulting Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D176662 Date of Disbursement 05 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>B. Full Name (Last, First, Middle Initial) Terteling Trust No. 8 dba Anteco Enterprises</p> <p>Mailing Address PO Box 45300</p> <p>City Boise State ID Zip Code 83711-5300</p> <p>Purpose of Disbursement Rent Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D192231 Date of Disbursement 04 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>C. Full Name (Last, First, Middle Initial) The Grove Hotel</p> <p>Mailing Address 245 S Capitol Boulevard</p> <p>City Boise State ID Zip Code 83702-7220</p> <p>Purpose of Disbursement Travel - Lodging Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D176989 Date of Disbursement 04 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 348.74</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

6348.74

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | |
|--|---|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) The Spokesman Review</p> <p>Mailing Address PO Box 3589</p> <p>City Spokane State WA Zip Code 99220-3589</p> <p>Purpose of Disbursement 3-month Newspaper Subscription</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D176964</p> <p>Date of Disbursement 04 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 69.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) The Spokesman Review</p> <p>Mailing Address PO Box 3589</p> <p>City Spokane State WA Zip Code 99220-3589</p> <p>Purpose of Disbursement Newspaper Subscription</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D176965</p> <p>Date of Disbursement 04 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 138.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) The UPS Store</p> <p>Mailing Address 1533 N Milwaukee Street</p> <p>City Boise State ID Zip Code 83704-8471</p> <p>Purpose of Disbursement Shipping Costs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D176791</p> <p>Date of Disbursement 04 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 96.60</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

303.60

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
The UPS Store

Mailing Address 1533 N Milwaukee Street

City Boise State ID Zip Code 83704-8471

Purpose of Disbursement
Ship Cell Phones to North Idaho
Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D176793
Date of Disbursement

04 / 02 / 2008

Amount of Each Disbursement this Period

13.41

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

B.

Full Name (Last, First, Middle Initial)
The UPS Store

Mailing Address 1533 N Milwaukee Street

City Boise State ID Zip Code 83704-8471

Purpose of Disbursement
Ship Materials
Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D176794
Date of Disbursement

04 / 22 / 2008

Amount of Each Disbursement this Period

31.67

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

C.

Full Name (Last, First, Middle Initial)
Travelocity

Mailing Address 3150 Sabre Drive

City Southlake State TX Zip Code 76092-2103

Purpose of Disbursement
Travel - Lodging
Candidate Name

002
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: D177013
Date of Disbursement

04 / 18 / 2008

Amount of Each Disbursement this Period

546.06

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

SUBTOTAL of Disbursements This Page (optional) ▶

591.14

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | |
|---|---|
| <p>A. Full Name (Last, First, Middle Initial) Travelocity</p> <p>Mailing Address 3150 Sabre Drive</p> <p>City Southlake State TX Zip Code 76092-2103</p> <p>Purpose of Disbursement Travel - Lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D177014 Date of Disbursement 04 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 238.02</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>B. Full Name (Last, First, Middle Initial) Travelocity</p> <p>Mailing Address 3150 Sabre Drive</p> <p>City Southlake State TX Zip Code 76092-2103</p> <p>Purpose of Disbursement Travel - lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D177015 Date of Disbursement 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 126.45</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>C. Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address 2 N La Salle Street</p> <p>City Chicago State IL Zip Code 60602-3702</p> <p>Purpose of Disbursement travel - Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D176776 Date of Disbursement 04 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

464.47

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) United Airlines | Transaction ID: D176778 Date of Disbursement 04 / 07 / 2008 |
| | Mailing Address 2 N La Salle Street | Amount of Each Disbursement this Period 1526.02 |
| | City Chicago State IL Zip Code 60602-3702 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Travel - Airfare Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | Category/Type 002 |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) US Bank | Transaction ID: D192088 Date of Disbursement 04 / 14 / 2008 |
| | Mailing Address 205 N 10th Street | Amount of Each Disbursement this Period 9.00 |
| | City Boise State ID Zip Code 83702-5773 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Bank Fees Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | Category/Type |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) US Bank | Transaction ID: D192256 Date of Disbursement 05 / 05 / 2008 |
| | Mailing Address 205 N 10th Street | Amount of Each Disbursement this Period 15.00 |
| | City Boise State ID Zip Code 83702-5773 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Bank Fees Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | Category/Type 001 |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) | 1550.02 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
USPS

Mailing Address 2100 S Cole Road

City Boise State ID Zip Code 83709-2817

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176550
Date of Disbursement

04 / 17 / 2008

Amount of Each Disbursement this Period

44.60

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

B.

Full Name (Last, First, Middle Initial)
USPS

Mailing Address 2100 S Cole Road

City Boise State ID Zip Code 83709-2817

Purpose of Disbursement
Postage

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176553
Date of Disbursement

04 / 07 / 2008

Amount of Each Disbursement this Period

78.00

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

C.

Full Name (Last, First, Middle Initial)
USPS

Mailing Address 2100 S Cole Road

City Boise State ID Zip Code 83709-2817

Purpose of Disbursement
Postage

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176554
Date of Disbursement

04 / 28 / 2008

Amount of Each Disbursement this Period

513.58

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

SUBTOTAL of Disbursements This Page (optional) ▶

636.18

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Virgin Mobile US

Transaction ID: D192229
Date of Disbursement

Mailing Address 10 Independence Boulevard

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 2 | 6 | | 2 | 0 | 0 | 8 |

City Warren State NJ Zip Code 07059-2730

Amount of Each Disbursement this Period

| |
|--------|
| 413.04 |
|--------|

Purpose of Disbursement
Cell Phones
Candidate Name

| |
|-----|
| 001 |
|-----|

Category/
Type

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

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Virgin Mobile US

Transaction ID: D192227
Date of Disbursement

Mailing Address 10 Independence Boulevard

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 1 | | 2 | 0 | 0 | 8 |

City Warren State NJ Zip Code 07059-2730

Amount of Each Disbursement this Period

| |
|--------|
| 103.26 |
|--------|

Purpose of Disbursement
Cell Phones
Candidate Name

| |
|-----|
| 001 |
|-----|

Category/
Type

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

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Walt C Minnick

Transaction ID: D177026
Date of Disbursement

Mailing Address 12578 N. Schicks Ridge Road

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 9 | | 2 | 0 | 0 | 8 |

City Boise State ID Zip Code 83714

Amount of Each Disbursement this Period

| |
|------|
| 9.94 |
|------|

Purpose of Disbursement
Travel:Meals/Beverage
Candidate Name
Walt C Minnick

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

Category/
Type

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

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: ID District: 01

* In-Kind Received

SUBTOTAL of Disbursements This Page (optional)

| |
|--------|
| 526.24 |
|--------|

TOTAL This Period (last page this line number only)

| |
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| |
|--|

**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)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial) Walt C Minnick | Transaction ID: D177027 Date of Disbursement 04 / 20 / 2008 |
| | Mailing Address 12578 N. Schicks Ridge Road | Amount of Each Disbursement this Period 1.40 |
| | City Boise State ID Zip Code 83714 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Travel:Meals/Beverages | Category/Type |
| | Candidate Name Walt C Minnick | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01 | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | * In-Kind Received |

| | | |
|----|---|--|
| B. | Full Name (Last, First, Middle Initial) Walt C Minnick | Transaction ID: D177028 Date of Disbursement 04 / 18 / 2008 |
| | Mailing Address 12578 N. Schicks Ridge Road | Amount of Each Disbursement this Period 9.60 |
| | City Boise State ID Zip Code 83714 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Travel:Meals/Beverages | Category/Type |
| | Candidate Name Walt C Minnick | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01 | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | * In-Kind Received |

| | | |
|----|---|--|
| C. | Full Name (Last, First, Middle Initial) Walt C Minnick | Transaction ID: D177029 Date of Disbursement 04 / 20 / 2008 |
| | Mailing Address 12578 N. Schicks Ridge Road | Amount of Each Disbursement this Period 60.00 |
| | City Boise State ID Zip Code 83714 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Travel:Taxis | Category/Type |
| | Candidate Name Walt C Minnick | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01 | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | * In-Kind Received |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional) | 71.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial) Walt C Minnick | Transaction ID: D177030 Date of Disbursement 04 / 20 / 2008 |
| | Mailing Address 12578 N. Schicks Ridge Road | Amount of Each Disbursement this Period 45.00 |
| | City Boise State ID Zip Code 83714 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Travel:Taxis | Category/Type |
| | Candidate Name Walt C Minnick | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01 | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | * In-Kind Received |

| | | |
|----|---|--|
| B. | Full Name (Last, First, Middle Initial) Walt C Minnick | Transaction ID: D177031 Date of Disbursement 04 / 23 / 2008 |
| | Mailing Address 12578 N. Schicks Ridge Road | Amount of Each Disbursement this Period 35.75 |
| | City Boise State ID Zip Code 83714 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Travel:Meals/Beverages | Category/Type |
| | Candidate Name Walt C Minnick | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01 | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | * In-Kind Received |

| | | |
|----|---|--|
| C. | Full Name (Last, First, Middle Initial) Walt C Minnick | Transaction ID: D177032 Date of Disbursement 04 / 21 / 2008 |
| | Mailing Address 12578 N. Schicks Ridge Road | Amount of Each Disbursement this Period 32.00 |
| | City Boise State ID Zip Code 83714 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Travel:Meals/Beverages | Category/Type |
| | Candidate Name Walt C Minnick | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01 | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | * In-Kind Received |

| | |
|--|---------------|
| SUBTOTAL of Disbursements This Page (optional) | 112.75 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) Walt C Minnick | Transaction ID: D177033 Date of Disbursement 04 / 22 / 2008 |
| | Mailing Address 12578 N. Schicks Ridge Road | Amount of Each Disbursement this Period 43.17 |
| | City Boise State ID Zip Code 83714 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Travel:Meals/Beverages Candidate Name Walt C Minnick Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ID District: 01 | * In-Kind Received |

| | | |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial) Walt C Minnick | Transaction ID: D177034 Date of Disbursement 04 / 25 / 2008 |
| | Mailing Address 12578 N. Schicks Ridge Road | Amount of Each Disbursement this Period 14.61 |
| | City Boise State ID Zip Code 83714 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Travel:Meals/Beverages Candidate Name Walt C Minnick Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ID District: 01 | * In-Kind Received |

| | | |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial) Walt C Minnick | Transaction ID: D177035 Date of Disbursement 04 / 23 / 2008 |
| | Mailing Address 12578 N. Schicks Ridge Road | Amount of Each Disbursement this Period 515.25 |
| | City Boise State ID Zip Code 83714 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Travel:Lodging Candidate Name Walt C Minnick Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ID District: 01 | * In-Kind Received |

| | |
|--|---------------|
| SUBTOTAL of Disbursements This Page (optional) | 573.03 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Walt C Minnick

Mailing Address 12578 N. Schicks Ridge Road

City Boise State ID Zip Code 83714

Purpose of Disbursement
Travel:Meals/Beverages

Candidate Name
Walt C Minnick

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: ID District: 01

Transaction ID: D177036
Date of Disbursement

04 / 20 / 2008

Amount of Each Disbursement this Period

8.89

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

* In-Kind Received

B.

Full Name (Last, First, Middle Initial)
Walt C Minnick

Mailing Address 12578 N. Schicks Ridge Road

City Boise State ID Zip Code 83714

Purpose of Disbursement

Candidate Name
Walt C Minnick

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: ID District: 01

Transaction ID: D177037
Date of Disbursement

04 / 20 / 2008

Amount of Each Disbursement this Period

18.20

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

* In-Kind Received

C.

Full Name (Last, First, Middle Initial)
Walt C Minnick

Mailing Address 12578 N. Schicks Ridge Road

City Boise State ID Zip Code 83714

Purpose of Disbursement
Food during travel

Candidate Name
Walt C Minnick

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: ID District: 01

Transaction ID: D192618
Date of Disbursement

05 / 07 / 2008

Amount of Each Disbursement this Period

8.20

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

* In-Kind Received

SUBTOTAL of Disbursements This Page (optional)

28.29

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Walt C Minnick

Transaction ID: D176967
Date of Disbursement

Mailing Address 12578 N. Schicks Ridge Road

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 2 | 0 | | 2 | 0 | 0 | 8 |

City Boise State ID Zip Code 83714

Amount of Each Disbursement this Period

| |
|--------|
| 141.84 |
|--------|

Purpose of Disbursement
Travel:Lodging

| |
|-------------------|
| Category/ Type |
|-------------------|

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

Candidate Name
Walt C Minnick

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

* In-Kind Received

State: ID District: 01

B.

Full Name (Last, First, Middle Initial)
Walt C Minnick

Transaction ID: D176975
Date of Disbursement

Mailing Address 12578 N. Schicks Ridge Road

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 2 | 4 | | 2 | 0 | 0 | 8 |

City Boise State ID Zip Code 83714

Amount of Each Disbursement this Period

| |
|-------|
| 55.00 |
|-------|

Purpose of Disbursement
Travel:Taxis

| |
|-------------------|
| Category/ Type |
|-------------------|

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

Candidate Name
Walt C Minnick

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

* In-Kind Received

State: ID District: 01

C.

Full Name (Last, First, Middle Initial)
Walt C Minnick

Transaction ID: D176976
Date of Disbursement

Mailing Address 12578 N. Schicks Ridge Road

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 2 | 5 | | 2 | 0 | 0 | 8 |

City Boise State ID Zip Code 83714

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Purpose of Disbursement
Travel:Taxis

| |
|-------------------|
| Category/ Type |
|-------------------|

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

Candidate Name
Walt C Minnick

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

* In-Kind Received

State: ID District: 01

SUBTOTAL of Disbursements This Page (optional) ►

| |
|--------|
| 246.84 |
|--------|

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

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Walt C Minnick

Transaction ID: D176977
Date of Disbursement

Mailing Address 12578 N. Schicks Ridge Road

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 2 | 5 | | 2 | 0 | 0 | 8 |

City Boise State ID Zip Code 83714

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Purpose of Disbursement
Travel:Taxi

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name
Walt C Minnick

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

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

* In-Kind Received

State: ID District: 01

B.

Full Name (Last, First, Middle Initial)
Walt C Minnick

Transaction ID: D176982
Date of Disbursement

Mailing Address 12578 N. Schicks Ridge Road

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 2 | 1 | | 2 | 0 | 0 | 8 |

City Boise State ID Zip Code 83714

Amount of Each Disbursement this Period

| |
|-------|
| 22.00 |
|-------|

Purpose of Disbursement
Travel - Taxi

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name
Walt C Minnick

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

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

* In-Kind Received

State: ID District: 01

C.

Full Name (Last, First, Middle Initial)
Walt C Minnick

Transaction ID: D176983
Date of Disbursement

Mailing Address 12578 N. Schicks Ridge Road

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 2 | 2 | | 2 | 0 | 0 | 8 |

City Boise State ID Zip Code 83714

Amount of Each Disbursement this Period

| |
|-------|
| 60.00 |
|-------|

Purpose of Disbursement
Travel - Taxi

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name
Walt C Minnick

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

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

* In-Kind Received

State: ID District: 01

SUBTOTAL of Disbursements This Page (optional)

| |
|-------|
| 92.00 |
|-------|

TOTAL This Period (last page this line number only)

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Walt C Minnick

Mailing Address 12578 N. Schicks Ridge Road

City Boise State ID Zip Code 83714

Purpose of Disbursement
Dinner: Campaign Manager Site Visit

Candidate Name
Walt C Minnick

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: ID District: 01

Transaction ID: D176400
Date of Disbursement

04 / 15 / 2008

Amount of Each Disbursement this Period

385.00

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

* In-Kind Received

B.

Full Name (Last, First, Middle Initial)
Walt C Minnick

Mailing Address 12578 N. Schicks Ridge Road

City Boise State ID Zip Code 83714

Purpose of Disbursement

Candidate Name
Walt C Minnick

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: ID District: 01

Transaction ID: D176724
Date of Disbursement

04 / 16 / 2008

Amount of Each Disbursement this Period

23.74

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

* In-Kind Received

C.

Full Name (Last, First, Middle Initial)
Woman of Steel

Mailing Address 3640 W Chinden Boulevard

City Garden City State ID Zip Code 83714-6544

Purpose of Disbursement
Food/Beverage

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D177005
Date of Disbursement

05 / 05 / 2008

Amount of Each Disbursement this Period

731.40

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

SUBTOTAL of Disbursements This Page (optional)

1140.14

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Bardenay | Transaction ID: D177040 Date of Disbursement 04 / 10 / 2008 |
| | Mailing Address 610 W Grove Street | Amount of Each Disbursement this Period 384.60 |
| | City Boise State ID ID Zip Code 83702-5926 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Staff Meeting Candidate Name | 001 Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Thomas K George | Transaction ID: D176199 Date of Disbursement 04 / 28 / 2008 |
| | Mailing Address 3948 N Magnuson St | Amount of Each Disbursement this Period 85.26 |
| | City Coeur D Alene State ID ID Zip Code 83815-8658 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Expense Reimbursement, Detail in Subvend Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) USPS | Transaction ID: D176564 Date of Disbursement 04 / 21 / 2008 |
| | Mailing Address 2100 S Cole Road | Amount of Each Disbursement this Period 5.63 |
| | City Boise State ID ID Zip Code 83709-2817 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Postage Candidate Name | 001 Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional) | 85.26 |
| 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: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Amber Jeanette Pence | Transaction ID: D176221 Date of Disbursement 04 / 08 / 2008 |
| | Mailing Address 401 Pueblo Street | Amount of Each Disbursement this Period 544.00 |
| | City Boise State ID ID Zip Code 83702-4430 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement REimbursement, Mail Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | Category/Type 003 |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) AutoSort | Transaction ID: D176815 Date of Disbursement 04 / 08 / 2008 |
| | Mailing Address 7286 W Airway Court | Amount of Each Disbursement this Period 544.00 |
| | City Boise State ID ID Zip Code 83709-2886 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| | Purpose of Disbursement Mailhouse Service Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | Category/Type 003 |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Amber Jeanette Pence | Transaction ID: D176223 Date of Disbursement 04 / 15 / 2008 |
| | Mailing Address 401 Pueblo Street | Amount of Each Disbursement this Period 127.20 |
| | City Boise State ID ID Zip Code 83702-4430 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Reimbursement, Meals Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | Category/Type 001 |

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| SUBTOTAL of Disbursements This Page (optional) | ▶ | 671.20 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Amber Jeanette Pence | Transaction ID: D176224 Date of Disbursement 04 / 21 / 2008 |
| | Mailing Address 401 Pueblo Street | Amount of Each Disbursement this Period 64.09 |
| | City Boise State ID ID Zip Code 83702-4430 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Reimbursement, Travel, Meals Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 002 Category/Type |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Amber Jeanette Pence | Transaction ID: D176227 Date of Disbursement 04 / 07 / 2008 |
| | Mailing Address 401 Pueblo Street | Amount of Each Disbursement this Period 99.33 |
| | City Boise State ID ID Zip Code 83702-4430 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Reimbursement, Meals Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 003 Category/Type |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) FedEx Kinko's | Transaction ID: D176372 Date of Disbursement 04 / 07 / 2008 |
| | Mailing Address 691 S Capitol Boulevard | Amount of Each Disbursement this Period 41.74 |
| | City Boise State ID ID Zip Code 83702-7121 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Event Invitations Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 003 Category/Type |

[MEMO ITEM]

| | | |
|--|---|--------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 163.42 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | | | | | | | | | | | | | | | | | | | | | | |
|-------------------------|---|---|--|-------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Complete Campaigns | Full Name (Last, First, Middle Initial) | Transaction ID: D176269 | | | | | | | | | | | | | | | | | | | | | |
| | Date of Disbursement | Date of Disbursement | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address | 601 Gateway Center Way Suite K | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 1 | 4 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 4 | | 1 | 4 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | | | |
| City | San Diego | State | CA | | | | | | | | | | | | | | | | | | | | |
| Zip Code | 92102-4537 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement | Transaction Processing Fees | <table border="1"> <tr> <td>34.00</td> </tr> </table> | | 34.00 | | | | | | | | | | | | | | | | | | | |
| 34.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: | 2008 | | | | | | | | | | | | | | | | | | | | |
| State: | District: | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Category/ Type | | | | | | | | | | | | | | | | | | | | |

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|-------------------------|---|---|--|------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| B. Complete Campaigns | Full Name (Last, First, Middle Initial) | Transaction ID: D176272 | | | | | | | | | | | | | | | | | | | | | |
| | Date of Disbursement | Date of Disbursement | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address | 601 Gateway Center Way Suite K | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 3 | 0 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 4 | | 3 | 0 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | | | |
| City | San Diego | State | CA | | | | | | | | | | | | | | | | | | | | |
| Zip Code | 92102-4537 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement | Transaction Processing Fee | <table border="1"> <tr> <td>2.50</td> </tr> </table> | | 2.50 | | | | | | | | | | | | | | | | | | | |
| 2.50 | | | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: | 2008 | | | | | | | | | | | | | | | | | | | | |
| State: | District: | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Category/ Type | | | | | | | | | | | | | | | | | | | | |

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|-------------------------|---|---|--|------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| C. Complete Campaigns | Full Name (Last, First, Middle Initial) | Transaction ID: D176277 | | | | | | | | | | | | | | | | | | | | | |
| | Date of Disbursement | Date of Disbursement | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address | 601 Gateway Center Way Suite K | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 0 | 3 | | 2 | 0 | 0 | 8 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 4 | | 0 | 3 | | 2 | 0 | 0 | 8 | | | | | | | | | | | | | | |
| City | San Diego | State | CA | | | | | | | | | | | | | | | | | | | | |
| Zip Code | 92102-4537 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement | Transaction Processing Fees | <table border="1"> <tr> <td>7.50</td> </tr> </table> | | 7.50 | | | | | | | | | | | | | | | | | | | |
| 7.50 | | | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: | <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: | 2008 | | | | | | | | | | | | | | | | | | | | |
| State: | District: | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Category/ Type | | | | | | | | | | | | | | | | | | | | |

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| SUBTOTAL of Disbursements This Page (optional) | ▶ | <table border="1"><tr><td>44.00</td></tr></table> | 44.00 |
| 44.00 | | | |
| TOTAL This Period (last page this line number only) | ▶ | <table border="1"><tr><td></td></tr></table> | |
| | | | |

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)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | |
|--|---|
| <p>A. Complete Campaigns</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 601 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4537</p> <p>Purpose of Disbursement Transaction Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p>Transaction ID: D176278</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="388.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>B. Complete Campaigns</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 601 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4537</p> <p>Purpose of Disbursement Transaction Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p>Transaction ID: D176279</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="46.25"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>C. Complete Campaigns</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 601 Gateway Center Way Suite K</p> <p>City San Diego State CA Zip Code 92102-4537</p> <p>Purpose of Disbursement Transaction Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p>Transaction ID: D176300</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="172.50"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |

| | |
|---|--|
| <p>SUBTOTAL of Disbursements This Page (optional)</p> | <p><input type="text" value="606.75"/></p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p><input type="text" value=""/></p> |

**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)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Russell Case | Transaction ID: D176319 Date of Disbursement 05 / 05 / 2008 |
| | Mailing Address 2808 N 26th Street | Amount of Each Disbursement this Period 2942.22 |
| | City Boise State ID Zip Code 83702-0313 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Catering Food/Beverage for Event Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 003 Category/Type |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) The Tuscany | Transaction ID: D177004 Date of Disbursement 04 / 24 / 2008 |
| | Mailing Address 130 E 39th Street | Amount of Each Disbursement this Period 2942.22 |
| | City New York State NY Zip Code 10016-0906 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Catering Food/Beverage Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 003 Category/Type |

[MEMO ITEM]

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) PayChex | Transaction ID: D176683 Date of Disbursement 04 / 30 / 2008 |
| | Mailing Address 10757 River Front Parkway Suite 200 | Amount of Each Disbursement this Period 10790.84 |
| | City South Jordan State UT Zip Code 84095-3552 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Payroll Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | | 001 Category/Type |

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| SUBTOTAL of Disbursements This Page (optional) | ▶ | 13733.06 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | |
|---|---|
| <p>A. Full Name (Last, First, Middle Initial) Mary Beth Beth Cooper</p> <p>Mailing Address 1432 Camel Back Ln Apt 205</p> <p>City Boise State ID Zip Code 83702-6575</p> <p>Purpose of Disbursement Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D176173 Date of Disbursement 04 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 1467.37</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p> |
| <p>B. Full Name (Last, First, Middle Initial) Mr. Tashi B Dondup</p> <p>Mailing Address 2119 1/2 N 19th St</p> <p>City Boise State ID Zip Code 83702-0824</p> <p>Purpose of Disbursement 4/30 Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D176714 Date of Disbursement 04 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 461.75</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p> |
| <p>C. Full Name (Last, First, Middle Initial) Mr. John M. Foster</p> <p>Mailing Address 5208 Fairmont Street</p> <p>City Boise State ID Zip Code 83706-1514</p> <p>Purpose of Disbursement 4/30/2008 Payroll Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: D176752 Date of Disbursement 04 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 1872.15</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p> |

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Thomas K George

Mailing Address 3948 N Magnuson St

City Coeur D Alene State ID Zip Code 83815-8658

Purpose of Disbursement
4/30/2008 Payroll

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176205
Date of Disbursement

04 / 30 / 2008

Amount of Each Disbursement this Period

1299.92

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Suzanne E Gore

Mailing Address 575 W Curling Dr

City Boise State ID Zip Code 83702-1639

Purpose of Disbursement
Payroll

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176183
Date of Disbursement

04 / 30 / 2008

Amount of Each Disbursement this Period

697.85

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Josh Paul Goyden

Mailing Address 3116 Hillway Drive

City Boise State ID Zip Code 83702-0960

Purpose of Disbursement
4/30/08 Payroll

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176740
Date of Disbursement

04 / 30 / 2008

Amount of Each Disbursement this Period

1235.62

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Amber Jeanette Pence

Mailing Address 401 Pueblo Street

City Boise State ID Zip Code 83702-4430

Purpose of Disbursement
4/30/2008 Payroll

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176230
Date of Disbursement

04 / 30 / 2008

Amount of Each Disbursement this Period

1629.29

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Mrs. Heather Riley

Mailing Address 1310 N 15th Street

City Boise State ID Zip Code 83702-3405

Purpose of Disbursement
4/30/2008 Payroll

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176705
Date of Disbursement

04 / 30 / 2008

Amount of Each Disbursement this Period

1205.52

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Mr. Thomas Schwarz

Mailing Address 2116 Kerr Street

City Boise State ID Zip Code 83705-3414

Purpose of Disbursement
4/30/2008 Payroll

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176846
Date of Disbursement

04 / 30 / 2008

Amount of Each Disbursement this Period

921.37

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
PayChex

Transaction ID: D176695
Date of Disbursement

Mailing Address 10757 River Front Parkway
Suite 200

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 5 | | 2 | 0 | 0 | 8 |

City State Zip Code
South Jordan UT 84095-3552

Amount of Each Disbursement this Period

| |
|----------|
| 11436.13 |
|----------|

Purpose of Disbursement
Payroll

| |
|-----|
| 001 |
|-----|

Category/
Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Mary Beth Beth Cooper

Transaction ID: D176169
Date of Disbursement

Mailing Address 1432 Camel Back Ln Apt 205

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 5 | | 2 | 0 | 0 | 8 |

City State Zip Code
Boise ID 83702-6575

Amount of Each Disbursement this Period

| |
|---------|
| 1467.37 |
|---------|

Purpose of Disbursement
Payroll

| |
|-----|
| 001 |
|-----|

Category/
Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Mr. Tashi B Dondup

Transaction ID: D176711
Date of Disbursement

Mailing Address 2119 1/2 N 19th St

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 5 | | 2 | 0 | 0 | 8 |

City State Zip Code
Boise ID 83702-0824

Amount of Each Disbursement this Period

| |
|--------|
| 461.75 |
|--------|

Purpose of Disbursement
4/15/2008 payroll

| |
|-----|
| 001 |
|-----|

Category/
Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

| |
|----------|
| 11436.13 |
|----------|

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

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. John M. Foster

Mailing Address 5208 Fairmont Street

City State Zip Code
Boise ID 83706-1514

Purpose of Disbursement
4/15/2008 Payroll

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176751
Date of Disbursement

04 / 15 / 2008

Amount of Each Disbursement this Period

2045.52

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Thomas K George

Mailing Address 3948 N Magnuson St

City State Zip Code
Coeur D Alene ID 83815-8658

Purpose of Disbursement
4/15/2008 Payroll

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176204
Date of Disbursement

04 / 15 / 2008

Amount of Each Disbursement this Period

1299.92

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Suzanne E Gore

Mailing Address 575 W Curling Dr

City State Zip Code
Boise ID 83702-1639

Purpose of Disbursement
Payroll

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176179
Date of Disbursement

04 / 15 / 2008

Amount of Each Disbursement this Period

845.29

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Josh Paul Goyden

Mailing Address 3116 Hillway Drive

City Boise State ID Zip Code 83702-0960

Purpose of Disbursement
4/15/2008 payroll

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176738
Date of Disbursement

04 / 15 / 2008

Amount of Each Disbursement this Period

1607.56

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Amber Jeanette Pence

Mailing Address 401 Pueblo Street

City Boise State ID Zip Code 83702-4430

Purpose of Disbursement
4/15/2008 Payroll

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176229
Date of Disbursement

04 / 15 / 2008

Amount of Each Disbursement this Period

1581.83

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Mrs. Heather Riley

Mailing Address 1310 N 15th Street

City Boise State ID Zip Code 83702-3405

Purpose of Disbursement
4/15/2008 Payroll

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176702
Date of Disbursement

04 / 15 / 2008

Amount of Each Disbursement this Period

1205.52

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Thomas Schwarz

Transaction ID: D176844
Date of Disbursement

Mailing Address 2116 Kerr Street

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 5 | | 2 | 0 | 0 | 8 |

City Boise State ID Zip Code 83705-3414

Amount of Each Disbursement this Period

| |
|--------|
| 921.37 |
|--------|

Purpose of Disbursement
4/15/2008 payroll

| |
|-----|
| 001 |
|-----|

Category/
Type

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

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Mrs. Heather Riley

Transaction ID: D176698
Date of Disbursement

Mailing Address 1310 N 15th Street

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 0 | 7 | | 2 | 0 | 0 | 8 |

City Boise State ID Zip Code 83702-3405

Amount of Each Disbursement this Period

| |
|--------|
| 139.59 |
|--------|

Purpose of Disbursement
Reimbursement - Office Supplies

| |
|-----|
| 001 |
|-----|

Category/
Type

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

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Flying Pie Pizzeria

Transaction ID: D176657
Date of Disbursement

Mailing Address 6508 W Fairview Avenue

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | | 0 | 6 | | 2 | 0 | 0 | 8 |

City Boise State ID Zip Code 83704-7718

Amount of Each Disbursement this Period

| |
|-------|
| 69.96 |
|-------|

Purpose of Disbursement
Food

| |
|-----|
| 001 |
|-----|

Category/
Type

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

Candidate Name

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

| |
|--------|
| 139.59 |
|--------|

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

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Staples | Transaction ID: D176339 Date of Disbursement 05 / 05 / 2008 |
| | Mailing Address 8059 Preece Drive | Amount of Each Disbursement this Period 22.10 |
| | City Boise State ID ID Zip Code 83704-9052 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Office Supplies Candidate Name | 001 Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

[MEMO ITEM]

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Mr. Tashi B Dondup | Transaction ID: D176706 Date of Disbursement 04 / 28 / 2008 |
| | Mailing Address 2119 1/2 N 19th St | Amount of Each Disbursement this Period 28.61 |
| | City Boise State ID ID Zip Code 83702-0824 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement USB Cables Candidate Name | 001 Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Mr. Tashi B Dondup | Transaction ID: D176710 Date of Disbursement 05 / 07 / 2008 |
| | Mailing Address 2119 1/2 N 19th St | Amount of Each Disbursement this Period 39.71 |
| | City Boise State ID ID Zip Code 83702-0824 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Envelopes,DVD Sleeves Candidate Name | 001 Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional) ▶

68.32

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Staples | Transaction ID: D176340 Date of Disbursement 04 / 21 / 2008 |
| | Mailing Address 8059 Preece Drive | Amount of Each Disbursement this Period 39.71 |
| | City Boise State ID ID Zip Code 83704-9052 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Office Supplies Candidate Name | 001 Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

[MEMO ITEM]

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) Josh Paul Goyden | Transaction ID: D176728 Date of Disbursement 04 / 03 / 2008 |
| | Mailing Address 3116 Hillway Drive | Amount of Each Disbursement this Period 22.50 |
| | City Boise State ID ID Zip Code 83702-0960 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Reimbursement - Hotel Candidate Name | 001 Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) Mr. John M. Foster | Transaction ID: D176747 Date of Disbursement 04 / 28 / 2008 |
| | Mailing Address 5208 Fairmont Street | Amount of Each Disbursement this Period 425.17 |
| | City Boise State ID ID Zip Code 83706-1514 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| | Purpose of Disbursement Reimbursement - Travel, Meals Candidate Name | 001 Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---|--------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 447.67 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

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

Mailing Address PO Box 390728

City Cambridge State MA Zip Code 02139-0008

Purpose of Disbursement
Processing Fees

Candidate Name

003
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176925
Date of Disbursement

04 / 24 / 2008

Amount of Each Disbursement this Period

134.32

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

B.

Full Name (Last, First, Middle Initial)
Joey Breslow

Mailing Address 455 E 8th Street

City New York State NY Zip Code 10009-5357

Purpose of Disbursement
Reimbursement - Travel Expenses

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176942
Date of Disbursement

04 / 28 / 2008

Amount of Each Disbursement this Period

251.90

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

C.

Full Name (Last, First, Middle Initial)
Joey Breslow

Mailing Address 455 E 8th Street

City New York State NY Zip Code 10009-5357

Purpose of Disbursement
Reimbursement - Airfare, Lodging

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176943
Date of Disbursement

04 / 08 / 2008

Amount of Each Disbursement this Period

865.78

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

SUBTOTAL of Disbursements This Page (optional) ▶

1252.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Hotel 43

Mailing Address 981 W Grove Street

City Boise State ID Zip Code 83702-7036

Purpose of Disbursement Reimbursement - Lodging

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D176944
Date of Disbursement 04 / 05 / 2008

Amount of Each Disbursement this Period 545.79

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address 2 N La Salle Street

City Chicago State IL Zip Code 60602-3702

Purpose of Disbursement Travel - Airfare

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D176779
Date of Disbursement 04 / 08 / 2008

Amount of Each Disbursement this Period 319.99

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Mr. Adam Harris

Mailing Address 8150 Emerald Street Ste 170

City Boise State ID Zip Code 83704

Purpose of Disbursement Travel - Air Fare

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D176999
Date of Disbursement 05 / 05 / 2008

Amount of Each Disbursement this Period 863.00

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

SUBTOTAL of Disbursements This Page (optional) ► 863.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 95 / 96

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

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NAME OF COMMITTEE (In Full)
Minnick for Congress

A.

Full Name (Last, First, Middle Initial)
Northwest Airlines

Mailing Address 2700 Lone Oak Parkway

City Eagan State MN Zip Code 55121-1546

Purpose of Disbursement
Travel - Airfare

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D176424

Date of Disbursement

04 / 14 / 2008

Amount of Each Disbursement this Period

863.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

120171.20

Form/Schedule: **F3A**

Transaction ID:

Response to October 16, 2008 Letter There are no changes to the amounts disclosed on this report. This amendment is to explain the changes made in the original amended Pre-Primary Report. The substantial increase in disbursements in the first amended 12 day Pre-Primary Report was due to two additional disbursements.

1. A wire transfer of \$24,221.40 was incorrectly recorded as a May 13, 2008 disbursement to Campaign Communications Solutions, Inc. It was reported on the July 15 Quarterly report in error. Upon discovery of the error, both the April 15 Quarterly report and the July 15 Quarterly report were amended to correctly disclose the disbursement on April 3, 2008.
2. A check written to Cole Village Chevron on May 6, 2008 for \$4,259.70 was not recorded timely in the check register. It was omitted in error from the original April 15 Quarterly report. A correction was made on the Amended April 15 Quarterly report to disclose this disbursement.