

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED

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12FE4MS FEDERAL MAIL CENTER

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

Delinda Morgan for Congress Morgan for Oregon

ADDRESS (number and street)

PO Box 16 239.18 NE Spring Hill Road Gaston OR 97119

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER

C

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

NEW

(N)

OR

AMENDED

(A)

OR

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on 1.1 / 0.6 / 20.12 in the State of OR

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

General (30G)

Runoff (30R)

Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period

03 / 01 / 2012

through

06 / 30 / 2012

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

Type or Print Name of Treasurer

Guy Lance Morgan

Signature of Treasurer

[Handwritten Signature]

Date

07 / 14 / 2012

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

12030860012

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Delinda Morgan for Congress

Report Covering the Period:

From:

MM / DD / YYYY
03 / 01 / 2012

To:

MM / DD / YYYY
06 / 30 / 2012

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))

1,389.57

1,389.57

(b) Total Contribution Refunds
(from Line 20(d))

(c) Net Contributions (other than loans)
(subtract Line 6(b) from Line 6(a))

1,389.57

1,389.57

7. Net Operating Expenditures

(a) Total Operating Expenditures
(from Line 17)

(b) Total Offsets to Operating
Expenditures (from Line 14)

(c) Net Operating Expenditures
(subtract Line 7(b) from Line 7(a))

8. Cash on Hand at Close of
Reporting Period (from Line 27)

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D)

For further information contact:

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

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

12030860013

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Delinda Morgan for Congress

Report Covering the Period: From:

MM	DD	YYYY
03	01	2012

To:

MM	DD	YYYY
06	30	2012

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

- (a) Individuals/Persons Other Than Political Committees
 - (i) Itemized (use Schedule A).....
 - (ii) Unitemized.....
 - (iii) TOTAL of contributions from individuals ▶
- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) The Candidate.....
- (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

--

--

13. LOANS:

- (a) Made or Guaranteed by the Candidate.....
- (b) All Other Loans.....
- (c) TOTAL LOANS (add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

--

--

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

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

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12030860014

**DETAILED SUMMARY PAGE
of Disbursements**

II. DISBURSEMENTS

**COLUMN A
Total This Period**

**COLUMN B
Election Cycle-to-Date**

17. OPERATING EXPENDITURES.....		
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees.....		
(c) Other Political Committeees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶		0

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1,389.57
25. SUBTOTAL (add Line 23 and Line 24).....	1,389.57
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	0
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1,389.57

12030860015

**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	OF	1
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Delinda Morgan for Congress

Full Name (Last, First, Middle Initial)

A. Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

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

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

12030860016

**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 OF

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

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NAME OF COMMITTEE (in Full)

Delinda Morgan for Congress

Full Name (Last, First, Middle Initial)

A.

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period: _____

Category/Type: _____

B.

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period: _____

Category/Type: _____

C.

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Full Name (Last, First, Middle Initial) _____

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period: _____

Category/Type: _____

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

12030860017

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 13a <input checked="" type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Delinda Morgan for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)
Morgan Delinda R.

Election:
 Primary
 General
 Other (specify) ▾

Mailing Address
PO Box 16, 23918 NE Spring Hill Rd.

City State ZIP Code
Gaston OR 97119

Original Amount of Loan 6538.30	Cumulative Payment To Date 0	Balance Outstanding at Close of This Period 6538.30
---	--	---

TERMS

Date Incurred 06 / 30 / 2012	Date Due MM / DD / YYYY	Interest Rate 0 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	-----------------------------------	-----------------------------------	---

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

1. Full Name (Last, First, Middle Initial) Morgan, Delinda R.	Name of Employer Self
Mailing Address PO Box 16, 23918 NE Spring Hill Rd.	Occupation
City State ZIP Code Gaston OR 97119	Amount Guaranteed Outstanding: 6538.30
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	6538.30
TOTALS This Period (last page in this line only).....	6538.30

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

12030860018

SCHEDULE C-1 (FEC Form 3)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
 Information found on
 Page 1 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) <i>Delinda Morgan for Congress</i>	FEC IDENTIFICATION NUMBER C
---	---------------------------------------

LENDING INSTITUTION (LENDER) Full Name <i>n/a</i>	Amount of Loan <i>n/a</i>	Interest Rate (APR) %
Mailing Address	Date Incurred or Established	
City State Zip Code	Date Due	

A. Has loan been restructured? No Yes If yes, date originally incurred

B. If line of credit, Amount of this Draw: *n/a* Total Outstanding Balance: *0*

C. Are other parties secondarily liable for the debt incurred?
 No Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
 No Yes If yes, specify: _____
 What is the value of this collateral?
 Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: _____
 What is the estimated value?
0

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).
 Location of account: _____
 Address: *n/a*
 Date account established: _____
 City, State, Zip: _____

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER Typed Name <i>G. L. Morgan</i> Signature <i>[Signature]</i>	DATE 07 / 14 / 2012
--	-------------------------------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:
 i. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
 ii. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
 iii. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name <i>G. L. Morgan</i> Signature <i>[Signature]</i> Title <i>Treasurer</i>	DATE 07 / 14 / 2012
---	-------------------------------

12030860019

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 1 OF 10
FOR LINE NUMBER: (check only one)

9
10

NAME OF COMMITTEE (In Full)
Delinda Morgan for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
N/A

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period *0*

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period *0*

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period *0*

1) SUBTOTALS This Period This Page (optional) ▶ *0*

2) TOTALS This Period (last page this line number only) ▶ *0*

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶ *0*

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ *0*

12030860020

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full) <i>Delinda Morgan for Congress</i>	Report Covering Period: From: MM / DD / YYYY 03 / 01 / 2012 To: MM / DD / YYYY 06 / 30 / 2012
--	--

Committee Name	(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
A <i>Delinda Morgan for Congress</i>	<i>1,389.57</i>	
B Column Total Last Page Only.....	<i>1,389.57</i>	

	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A					<i>6,538.39</i>	
B					<i>6,538.30</i>	
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A						
B						
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A						
B						
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A						
B						
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A						
B						

12030860021

12030860022

Delinda Morgan Loan to Campaign

March 1 through June 30, 2012

7:03 PM
07/14/12
Accrual Basis

Date	Name	Name Address	Memo	Amount
Mar - Jun 12				
3/1/2012	Oregon Secretary of State	255 Capitol St. NE Ste. 501 Salem, OR 97310-1306	Loan made by Candidate to Campaign	100.00
3/2/2012	Delinda Morgan for Congress	PO Box 16 Gaston, OR 97119	Loan made by Candidate to Campaign	500.00
3/6/2012	Oregon Secretary of State	255 Capitol St. NE Ste. 501 Salem, OR 97310-1306	Loan made by Candidate to Campaign/Voter...	2,500.00
4/4/2012	Oregon Stationers	217 NE 3rd Street McMinnville OR 97128	Loan made by Candidate to Campaign/Post ...	537.50
4/10/2012	Oregon Stationers	217 NE 3rd Street McMinnville OR 97128	Loan made by Candidate to Campaign/Busin...	75.00
4/13/2012	USA	10750 McDermott Fwy San Antonio TX 78288-0570	Loan made by Candidate to Campaign/Dorch...	480.60
4/24/2012	Republican Women Downtow...		Loan made by Candidate to Campaign	40.00
5/1/2012	Alpine Cleaners	140 NE 19th Street McMinnville OR 97128	Loan made by Candidate to Campaign/Dry Cl...	23.30
5/10/2012	Oregon Stationers	217 NE 3rd Street McMinnville OR 97128	Loan to Campaign/Business cards	98.50
5/14/2012	Alpine Cleaners	140 NE 19th Street McMinnville OR 97128	Dry Clean Clothes	36.65
5/31/2012	Alpine Cleaners	140 NE 19th Street McMinnville OR 97128	Dry Clean Clothes	44.80
6/6/2012	Carol Prause	408 SE Baker Street McMinnville, OR 97128	Contract, American Strategies	75.00
6/6/2012	USA	10750 McDermott Fwy San Antonio TX 78288-0570	Meals	115.00
6/9/2012	Helvetia Tavern	10275 NW Helvetia Road Hillsboro OR 97124	Loan made by Candidate to Campaign	44.00
6/11/2012	Johnstone & Goodfellow	1215 NW Adams McMinnville OR 97128	Loan made by Candidate to Campaign/ Legal	75.00
6/20/2012	Beaverton-Hillsboro Republic...		Loan made by Candidate to Campaign 25+12	37.00
6/20/2012	Republican Women of Downtb...		Memberships	50.00
6/21/2012	Washington County Elections	3700 SW Murray Blvd. Suite 101 Beaverton, OR 97005	Loan made by Candidate to Campaign	10.00
6/21/2012	Washington County Elections	3700 SW Murray Blvd. Suite 101 Beaverton, OR 97005	Loan made by Candidate to Campaign	2.20
6/22/2012	Oregon Stationers	217 NE 3rd Street McMinnville OR 97128	Loan made by Candidate to Campaign/cards	11.98
6/28/2012	USA	10750 McDermott Fwy San Antonio TX 78288-0570	Loan made by Candidate to Campaign	111.08
				<u>4,972.61</u>

mileage for campaign 3,687 miles X \$0.555 = + 2,046.29

Total loan made by Candidate = 6,538.30
to campaign

Mar - Jun 12

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

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

FOR LINE NUMBER: PAGE **1** OF **4**
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Delinda Morgan For Congress

A. Full Name (Last, First, Middle Initial)
Mayer Christiana

Mailing Address
2746 16th Place

City **Forest Grove** State **OR** Zip Code **97116**

FEC ID number of contributing federal political committee.
Not yet assigned

Name of Employer Occupation
Student

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1.000.00

Date of Receipt

MM	DD	YYYY
05	25	2012

Amount of Each Receipt this Period
1.000.00

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

Mailing Address
1625 7th

City **Columbia City** State **OR** Zip Code **97018**

FEC ID number of contributing federal political committee.
Not yet assigned

Name of Employer Occupation
Self Radiologist

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1.945.7

Date of Receipt

MM	DD	YYYY
05	29	2012

Amount of Each Receipt this Period
1.945.7

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

Mailing Address
2337 Margaret NW

City **Salem** State **OR** Zip Code **97304**

FEC ID number of contributing federal political committee.
Not yet assigned

Name of Employer Occupation
Carroll Consulting Consultant

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1.000.00

Date of Receipt

MM	DD	YYYY
06	15	2012

Amount of Each Receipt this Period
1.000.00

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

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

3.945.7

12030860023

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

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

FOR LINE NUMBER: PAGE **2** OF **4**

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

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NAME OF COMMITTEE (In Full)
Delinda Morgan For Congress

Full Name (Last, First, Middle Initial)

A. HOFFMAN CARA B.

Mailing Address
7608 E. WING SHADOW RD

City State Zip Code
SCOTTSDALE AZ 85255

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
NA STAY HOME MOM

Receipt For:
 Primary General
 Other (specify)
Election Cycle-to-Date
99 00

Date of Receipt
06 / 15 / 2012

Amount of Each Receipt this Period
99.00

Full Name (Last, First, Middle Initial)

B. SMITH J. MICHAEL

Mailing Address
4766 AUSTIN TRACE

City State Zip Code
ZIONSVILLE IN 46077

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
Self Employed Investor

Receipt For:
 Primary General
 Other (specify)
Election Cycle-to-Date
99.00

Date of Receipt
06 / 15 / 2012

Amount of Each Receipt this Period
99.00

Full Name (Last, First, Middle Initial)

C. SMITH J. KATHLEEN

Mailing Address
4766 AUSTIN TRACE

City State Zip Code
ZIONSVILLE IN 46077

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
Home maker

Receipt For:
 Primary General
 Other (specify)
Election Cycle-to-Date
99.00

Date of Receipt
06 / 15 / 2012

Amount of Each Receipt this Period
99.00

SUBTOTAL of Receipts This Page (optional).....
297.00

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

12030860024

**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 3 OF 4	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
Delinda Morgan for Congress

A. Full Name (Last, First, Middle Initial)
Brown Debbie

Mailing Address
700 E. Redlands Blvd Suite 409

City **Redlands** State **CA** Zip Code **92373**

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

Name of Employer **N/A** Occupation **Volunteer**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
9900

Date of Receipt
06 / 15 / 2012

Amount of Each Receipt this Period
99.00

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

Mailing Address
301 S. TIPPECANOE AVE.

City **San Bernardino** State **CA** Zip Code **92408**

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

Name of Employer **Stater Bros.** Occupation **Executive**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
20000

Date of Receipt
06 / 15 / 2012

Amount of Each Receipt this Period
200.00

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

Mailing Address
7608 E. Wingshadow Rd

City **Scottsdale** State **AZ** Zip Code **85255**

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

Name of Employer **Fazic Golf Course** Occupation **Designer**

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
9900

Date of Receipt
06 / 15 / 2012

Amount of Each Receipt this Period
99.00

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

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

398.00

12030860025

**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 4 OF 4
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Delinda Morgan for Congress

Full Name (Last, First, Middle Initial)

A. **Makin Gayle**

Mailing Address
25563 SW Baker Rd

City **Sherwood** State **OR** Zip Code **97140**

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

Name of Employer **Self** Occupation **Farmer**

Receipt For: Primary General Other (specify)
Election Cycle-to-Date **5000**

Date of Receipt
06 / 15 / 2012

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)

B. **Hammer Thomas**

Mailing Address
2490 Church Street SE

City **Salem** State **OR** Zip Code **97302**

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

Name of Employer **Self** Occupation **Farmer**

Receipt For: Primary General Other (specify)
Election Cycle-to-Date **25000**

Date of Receipt
06 / 15 / 2012

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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

Date of Receipt

Amount of Each Receipt this Period

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

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

30000
138957

12030860026

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
7/16/12
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

ASD
PREPARER
(3/2005)

7/20/12
DATE PREPARED

1203086027