



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Oregon Republican Party

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		7182.41
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	7182.41									
(c) Total Receipts (from Line 19) .....	55434.59	55434.59								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	62617.00	62617.00								
7. Total Disbursements (from Line 31) .....	30161.34	30161.34								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	32455.66	32455.66								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	318797.27									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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  
Oregon Republican Party

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	15820.00	15820.00
(i) Itemized (use Schedule A) .....	3275.00	3275.00
(ii) Unitemized .....	19095.00	19095.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	1000.00	1000.00
(c) Other Political Committees (such as PACs) .....	20095.00	20095.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	3008.00	3008.00
13. All Loans Received .....	30000.00	30000.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	2331.59	2331.59
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	2331.59	2331.59
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	55434.59	55434.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	53103.00	53103.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	2044.13	2044.13
(ii) Non-Federal Share.....	3633.99	3633.99
(b) Other Federal Operating Expenditures.....	5250.00	5250.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	10928.12	10928.12
22. Transfers to Affiliated/Other Party Committees.....	10000.00	10000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	9233.22	9233.22
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	9233.22	9233.22
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	30161.34	30161.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26527.35	26527.35

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	20095.00	20095.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20095.00	20095.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	7294.13	7294.13
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	7294.13	7294.13

**SCHEDULE L (FEC Form 3X)**

**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID: SL1

NAME OF COMMITTEE (In Full) Oregon Republican Party
NAME OF ACCOUNT KEY LEVIN

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	0.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	0.00
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	3636.50	3636.50
8. RECEIPTS..... (from Line 3)	0.00	0.00
9. SUBTOTAL..... (Add Lines 7 and 8)	3636.50	3636.50
10. DISBURSEMENTS..... (From Line 6)	0.00	0.00
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	3636.50	3636.50

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

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

FOR LINE NUMBER: PAGE 7 / 39  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<p><b>A.</b> Full Name (Last, First, Middle Initial) Richard Geary</p> <p>Mailing Address 1211 SW 5th Ave Ste 2980</p> <p>City State Zip Code Portland OR 97204-3729</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Retired Retired</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 1 / 0 4 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> 80930.C93824</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p> <p>Receipt</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Donald Malarkey</p> <p>Mailing Address 2495 E Nob Hill St SE</p> <p>City State Zip Code Salem OR 97302-3733</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Information Requested Information Requested</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">-9900.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 1 / 0 8 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> 80930.C93827</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p> <p>Receipt</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Donald Malarkey</p> <p>Mailing Address 2495 E Nob Hill St SE</p> <p>City State Zip Code Salem OR 97302-3733</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Information Requested Information Requested</p> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">20100.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 1 / 3 0 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> 90103.C100830</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">10000.00</span></p> <p>Receipt</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">11100.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b>	Full Name (Last, First, Middle Initial) Donald Malarkey	Date of Receipt MM / DD / YYYY 01 / 31 / 2008
	Mailing Address 2495 E Nob Hill St SE	<b>Transaction ID:</b> 90103.C100831
	City State Zip Code Salem OR 97302-3733	Amount of Each Receipt this Period -10000.00
	FEC ID number of contributing federal political committee. <b>C</b>	Redesignation FROM Memo <b>[MEMO ITEM]</b> Redesignation to Non Fed
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20100.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Timothy Rutten	Date of Receipt MM / DD / YYYY 01 / 03 / 2008
	Mailing Address 641 Constitution Ave NE	<b>Transaction ID:</b> 80930.C93822
	City State Zip Code Washington DC 20002-6035	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Fluor Corporation	Occupation Senior Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Marylin Shannon	Date of Receipt MM / DD / YYYY 01 / 25 / 2008
	Mailing Address 7955 Portland Rd NE	<b>Transaction ID:</b> 80930.C93870
	City State Zip Code Brooks OR 97305-9401	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b>	Full Name (Last, First, Middle Initial) Marylin Shannon	Date of Receipt MM / DD / YYYY 01 / 25 / 2008
	Mailing Address 7955 Portland Rd NE	<b>Transaction ID:</b> 80930.C93869
	City State Zip Code Brooks OR 97305-9401	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Marylin Shannon	Date of Receipt MM / DD / YYYY 01 / 25 / 2008
	Mailing Address 7955 Portland Rd NE	<b>Transaction ID:</b> 80930.C93871
	City State Zip Code Brooks OR 97305-9401	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard Sohn	Date of Receipt MM / DD / YYYY 01 / 02 / 2008
	Mailing Address 62 N River Dr	<b>Transaction ID:</b> 80930.C93828
	City State Zip Code Roseburg OR 97470-9473	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Lone Rock Timber Company Occupation Lands Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2120.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 39
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.**

Full Name (Last, First, Middle Initial) J. B. Weston		Date of Receipt MM / DD / YYYY 01 / 29 / 2008
Mailing Address PO Box 362		<b>Transaction ID:</b> 80930.C93883
City Eagle Creek	State OR	Zip Code 97022-0362
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Weston Pontiac	Occupation Co-owner	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**B.**

Full Name (Last, First, Middle Initial) Jan Weston		Date of Receipt MM / DD / YYYY 01 / 02 / 2008
Mailing Address 18010 S Eaden Rd		<b>Transaction ID:</b> 80930.C93794
City Oregon City	State OR	Zip Code 97045-9665
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	15820.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 39	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b>	Full Name (Last, First, Middle Initial) Walden for Congress Inc		Date of Receipt																					
	Mailing Address PO Box 1091		<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>1</td><td></td><td>2</td><td>5</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	1		2	5		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	1		2	5		2	0	0	8														
	City State Zip Code Hood River OR 97031-0037		<b>Transaction ID:</b> 80930.C93867																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00																						
Name of Employer Occupation		Receipt																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00																						

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 39
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b>	Full Name (Last, First, Middle Initial) Gordon Smith Victory Committee		Date of Receipt
	Mailing Address 228 S Washington St Ste 115		<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Alexandria	VA	22314-5404
	FEC ID number of contributing federal political committee.		<input type="text" value="C00441287"/>
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="3008.00"/>	Transaction ID: 80930.C93838
			Amount of Each Receipt this Period <input type="text" value="3008.00"/>
			Transfers From Affil./Auth.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="3008.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="3008.00"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 39
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input checked="" type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b>	Full Name (Last, First, Middle Initial) Donald Malarkey		Date of Receipt
	Mailing Address 2495 E Nob Hill St SE		<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Salem	OR	97302-3733
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 80930.C93966
Name of Employer Information Requested		Occupation Information Requested	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="10000.00"/>
		<input type="text" value="20100.00"/>	Other Loans

<b>B.</b>	Full Name (Last, First, Middle Initial) Julie Scheel		Date of Receipt
	Mailing Address 3951 Croisan Creek Rd S		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Salem	OR	97302-9474
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 80930.C93965
Name of Employer Homemaker		Occupation Housewife	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="10000.00"/>
		<input type="text" value="10000.00"/>	Other Loans

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Scheel		Date of Receipt
	Mailing Address 3951 Croisan Creek Rd S		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Salem	OR	97302-9474
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 80930.C93964
Name of Employer Great Harvest Bread Comp		Occupation Self	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="10000.00"/>
		<input type="text" value="10000.00"/>	Other Loans

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="30000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="30000.00"/>

**SCHEDULE B (FEC Form 3X)  
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
Oregon Republican Party

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc</p> <p>Mailing Address 12450 Automobile Boulevard</p> <p>City Clearwater State FL Zip Code 34622-</p> <p>Purpose of Disbursement List rental - OR GOP</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80930.E13418</p> <p>Date of Disbursement 01 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>LIST RENTAL - OR GOP</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) World Trade Center &amp; Catering</p> <p>Mailing Address PO Box 3340</p> <p>City Portland State OR Zip Code 97208-</p> <p>Purpose of Disbursement Catering/ORGOP</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80930.E13420</p> <p>Date of Disbursement 01 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>CATERING/ORGOP</p>

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

5250.00

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

5250.00

**SCHEDULE B (FEC Form 3X)  
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 type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)  
Oregon Republican Party

Transaction ID: 90103.E16643

Date of Disbursement

Mailing Address c/o Key Bank Federal Acct  
1500 Edgewater St NW

<sup>M</sup> 0	<sup>M</sup> 1	/	<sup>D</sup> 3	<sup>D</sup> 1	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 8
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

City Salem State OR Zip Code 97302-

Amount of Each Disbursement this Period

10000.00
----------

Purpose of Disbursement  
Transfer Malarkey Loan to Non Fed

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

10000.00
----------

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

10000.00
----------

**SCHEDULE B (FEC Form 3X)  
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b>	Full Name (Last, First, Middle Initial) Brianne Hyder <hr/> Mailing Address 7068 SW Valenta Ct <hr/> City Portland State OR Zip Code 97223-2260 <hr/> Purpose of Disbursement FEA Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80930.E13413 Date of Disbursement 01 / 15 / 2008 <hr/> Amount of Each Disbursement this Period 1870.92 <hr/> FEA PAYROLL
<b>B.</b>	Full Name (Last, First, Middle Initial) Internal Revenue Svc-Payroll Tax Dept. <hr/> Mailing Address c/o Key Bank 1500 Edgewater St NW <hr/> City Salem State OR Zip Code 97304- <hr/> Purpose of Disbursement FEA Payroll Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80930.E13425 Date of Disbursement 01 / 15 / 2008 <hr/> Amount of Each Disbursement this Period 1933.14 <hr/> FEA PAYROLL TAXES
<b>C.</b>	Full Name (Last, First, Middle Initial) Internal Revenue Svc-Payroll Tax Dept. <hr/> Mailing Address c/o Key Bank 1500 Edgewater St NW <hr/> City Salem State OR Zip Code 97304- <hr/> Purpose of Disbursement FEA Payroll Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80930.E13426 Date of Disbursement 01 / 15 / 2008 <hr/> Amount of Each Disbursement this Period 64.64 <hr/> FEA PAYROLL TAXES

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3868.70
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Internal Revenue Svc-Payroll Tax Dept.	Transaction ID: 80930.E13427 Date of Disbursement
	Mailing Address c/o Key Bank 1500 Edgewater St NW	<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City Salem State OR Zip Code 97304-	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Payroll Taxes	<input type="text" value="6.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL TAXES

B.	Full Name (Last, First, Middle Initial) Amy Langdon	Transaction ID: 80930.E13422 Date of Disbursement
	Mailing Address 2830 Foxhaven Dr SE	<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City Salem State OR Zip Code 97306-2526	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Payroll	<input type="text" value="2100.62"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

C.	Full Name (Last, First, Middle Initial) Oregon Department of Revenue	Transaction ID: 80930.E14495 Date of Disbursement
	Mailing Address P.O. Box 14800	<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City Salem State OR Zip Code 97309-0920	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Payroll Taxes	<input type="text" value="694.81"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL TAXES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2801.43"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Belinda Smith	Transaction ID: 80930.E13423 Date of Disbursement 01 / 15 / 2008
	Mailing Address 687 SW Concord Way	Amount of Each Disbursement this Period 624.43
	City Beaverton State OR Zip Code 97006-	
	Purpose of Disbursement FEA Payroll	FEA PAYROLL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Smith Barney Investments	Transaction ID: 80930.E13428 Date of Disbursement 01 / 15 / 2008
	Mailing Address 121 SW Morrison St Ste 1600	Amount of Each Disbursement this Period 966.01
	City Portland State OR Zip Code 97204-3146	
	Purpose of Disbursement FEA IRA Contribution	FEA IRA CONTRIBUTION
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Janice Williamson	Transaction ID: 80930.E13424 Date of Disbursement 01 / 15 / 2008
	Mailing Address 4065 Mandy Ave SE	Amount of Each Disbursement this Period 972.65
	City Salem State OR Zip Code 97302-1712	
	Purpose of Disbursement FEA Payroll	FEA PAYROLL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2563.09</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>9233.22</b>

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

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

**LOANS**

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**Transaction ID:** LS80930.C93964

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Michael Scheel	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3951 Croisan Creek Rd S	
City Salem State OR ZIP Code 97302-9474	

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
-------------------------------------	------------------------------------	---

**TERMS**

Date Incurred MM DD YY Y 01 31 2008	Date Due 20091231	Interest Rate 8.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	----------------------	-------------------------------	---

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional) .....	<input style="width: 100%;" type="text" value="10000.00"/>
<b>TOTALS</b> This Period (last page in this line only) .....	<input style="width: 100%;" type="text" value=".00"/>

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

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

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

FOR LINE 13 OF FORM 3X

**LOANS**

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

Transaction ID: LS80930.C93966

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Donald Malarkey

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address 2495 E Nob Hill St SE

City Salem State OR ZIP Code 97302-3733

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

**TERMS**

Date Incurred: MM DD YYYY 01 30 2008  
Date Due: 20091231  
Interest Rate: 8.00 % (apr)  
Secured:  Yes  No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	10000.00
<b>TOTALS</b> This Period (last page in this line only) .....	▶	.00

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

# SCHEDULE C (FEC Form 3X)

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

FOR LINE 13 OF FORM 3X

## LOANS

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

Transaction ID: LS80930.C93965

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Julie Scheel

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address 3951 Croisan Creek Rd S

City Salem State OR ZIP Code 97302-9474

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

### TERMS

Date Incurred: MM DD YYYY 01 31 2008  
 Date Due: 20091231  
 Interest Rate: 8.00 % (apr)  
 Secured:  Yes  No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	10000.00
<b>TOTALS</b> This Period (last page in this line only) .....	▶	30000.00

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

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Aristotle International			Nature of Debt (Purpose): Computer Support
Mailing Address 205 Pennsylvania Ave SE			
City Washington	State DC	ZIP Code 20003-1182	

Outstanding Balance Beginning This Period <input type="text" value="1950.00"/>		<b>Transaction ID:</b> LS80930.E13362	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1950.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Amy Langdon			Nature of Debt (Purpose): Travel
Mailing Address 2830 Foxhaven Dr SE			
City Salem	State OR	ZIP Code 97306-2526	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID:</b> LS90103.E16624	
Amount Incurred This Period <input type="text" value="24.39"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="24.39"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> FLS Connect			Nature of Debt (Purpose): Fundraising Phone Calls OGOP
Mailing Address 7320 N Dreamy Draw Dr			
City Phoenix	State AZ	ZIP Code 85020-5212	

Outstanding Balance Beginning This Period <input type="text" value="47593.24"/>		<b>Transaction ID:</b> LS80930.E9436	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="47593.24"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="49567.63"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct Mail Systems, Inc	Nature of Debt (Purpose): List rental - OR GOP
Mailing Address 12450 Automobile Boulevard	
City State ZIP Code Clearwater FL 34622-	

Outstanding Balance Beginning This Period 23954.35	<b>Transaction ID:</b> LS80930.E13418	
Amount Incurred This Period 5189.42	Payment This Period 5000.00	Outstanding Balance at Close of This Period 24143.77

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor United States Treasury	Nature of Debt (Purpose): FEA Payroll Taxes
Mailing Address US Department of Treasury	
City State ZIP Code Ogden UT 84403-	

Outstanding Balance Beginning This Period 30183.46	<b>Transaction ID:</b> LS81215.E16394	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 30183.46

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Wes Lematta	Nature of Debt (Purpose): Contribution Refund
Mailing Address 800 NE Tenney Rd Ste 110	
City State ZIP Code Vancouver WA 98685-2899	

Outstanding Balance Beginning This Period 2500.00	<b>Transaction ID:</b> LS81208.E16256	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>56827.23</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Office Depot	Nature of Debt (Purpose): Office supplies
Mailing Address 10520 SW Cascade Ave	
City State ZIP Code Portland OR 97223-4302	

Outstanding Balance Beginning This Period 791.04	<b>Transaction ID:</b> LS81228.E16579	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 791.04

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor U.S. Postmaster	Nature of Debt (Purpose): Postage - OR GOP
Mailing Address Tigard or Main Branch	
City State ZIP Code Tigard OR 97223-	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID:</b> LS90103.E16638	
Amount Incurred This Period 175.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 175.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Donna Woolley	Nature of Debt (Purpose): Contribution Refund
Mailing Address PO Box 43	
City State ZIP Code Drain OR 97435-0043	

Outstanding Balance Beginning This Period 6000.00	<b>Transaction ID:</b> LS81117.E15765	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6000.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>6966.04</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Joan Austin			Nature of Debt (Purpose): Contribution Refund
Mailing Address PO Box 209			
City Newberg	State OR	ZIP Code 97132-0209	

Outstanding Balance Beginning This Period		Transaction ID: LS81116.E15755	
2500.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	2500.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Qwest			Nature of Debt (Purpose): Phone Service
Mailing Address PO Box 91155			
City Seattle	State WA	ZIP Code 98111-9255	

Outstanding Balance Beginning This Period		Transaction ID: LS90103.E16635	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
55.50	0.00	55.50	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Dell Financial			Nature of Debt (Purpose): Equipment Lease
Mailing Address PO Box 120001			
City Dallas	State TX	ZIP Code 75312-	

Outstanding Balance Beginning This Period		Transaction ID: LS90103.E16628	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
97.30	0.00	97.30	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	2652.80
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 26 / 39
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor South Salem Mini Storage	Nature of Debt (Purpose): Facility Rental - OR GOP
Mailing Address 5585 SE Commercial St	
City Salem State OR ZIP Code 97306-	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID:</b> LS80930.E13602	
Amount Incurred This Period 90.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 90.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Certified Property	Nature of Debt (Purpose): Rent
Mailing Address PO Box 269	
City Salem State OR ZIP Code 97308-0269	

Outstanding Balance Beginning This Period 31808.34	<b>Transaction ID:</b> LS80930.E13493	
Amount Incurred This Period 6965.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 38773.34

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Eagle Security	Nature of Debt (Purpose): Utilities - OR GOP
Mailing Address PO Box 4531	
City Salem State OR ZIP Code 97302-	

Outstanding Balance Beginning This Period 74.85	<b>Transaction ID:</b> LS81228.E16609	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 74.85

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>38938.19</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> LifeWise			Nature of Debt (Purpose): Insurance
Mailing Address 815 SW Bond St			
City Bend	State OR	ZIP Code 97702-	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID:</b> LS90103.E16632	
Amount Incurred This Period <input type="text" value="354.45"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="354.45"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Pitney Bowes Purchase Power			Nature of Debt (Purpose): Postage - OR GOP
Mailing Address PO Box 856042			
City Louisville	State KY	ZIP Code 40285-6042	

Outstanding Balance Beginning This Period <input type="text" value="7017.69"/>		<b>Transaction ID:</b> LS80930.E13421	
Amount Incurred This Period <input type="text" value="2378.91"/>	Payment This Period <input type="text" value="1380.00"/>	Outstanding Balance at Close of This Period <input type="text" value="8016.60"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Eagle Teleconferencing			Nature of Debt (Purpose): Phone Service
Mailing Address 207 West Washington Street			
City Rushville	State IL	ZIP Code 62681-	

Outstanding Balance Beginning This Period <input type="text" value="621.42"/>		<b>Transaction ID:</b> LS90103.E16623	
Amount Incurred This Period <input type="text" value="69.55"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="690.97"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="9062.02"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> AT&T Wireless			Nature of Debt (Purpose): Phone service
Mailing Address PO Box 30459			
City Los Angeles	State CA	ZIP Code 90030-	

Outstanding Balance Beginning This Period <input type="text" value="67180.90"/>		<b>Transaction ID:</b> LS80930.E11336	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="67180.90"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> U.S. Postmaster			Nature of Debt (Purpose): Postage - OR GOP
Mailing Address 410 Mill St SE			
City Salem	State OR	ZIP Code 97301-	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID:</b> LS90103.E16637	
Amount Incurred This Period <input type="text" value="84.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="84.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Pacific NW Telco			Nature of Debt (Purpose): Phone service
Mailing Address 10200 Greenburg Road, Suite 340			
City Portland	State OR	ZIP Code 97223-	

Outstanding Balance Beginning This Period <input type="text" value="135.00"/>		<b>Transaction ID:</b> LS80930.E13433	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="135.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="67264.90"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Integra Telecom			Nature of Debt (Purpose): Phone Service
Mailing Address PO Box 34988			
City Seattle	State WA	ZIP Code 98124-1988	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID:</b> LS90103.E16631	
Amount Incurred This Period <input type="text" value="663.39"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="663.39"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Ricoh Customer Finance Corp.			Nature of Debt (Purpose): Equipment Lease
Mailing Address PO Box 310010273			
City Pasadena	State CA	ZIP Code 91110-0001	

Outstanding Balance Beginning This Period <input type="text" value="137.00"/>		<b>Transaction ID:</b> LS80930.E13373	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="137.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Robert Freres			Nature of Debt (Purpose): Excess Levin Contribution Refund
Mailing Address PO Box 276			
City Lyons	State OR	ZIP Code 97358-0276	

Outstanding Balance Beginning This Period <input type="text" value="2500.00"/>		<b>Transaction ID:</b> LS80930.E13313	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2500.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="3300.39"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Barbs Professional Bookkeeping &Tax			Nature of Debt (Purpose): Payroll Service
Mailing Address 3295 Triangle Dr SE Ste 112			
City Salem	State OR	ZIP Code 97302-4566	

Outstanding Balance Beginning This Period 962.50		<b>Transaction ID:</b> LS80930.E13364	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 962.50	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Discover Corporate Card			Nature of Debt (Purpose): Travel/office supplies
Mailing Address PO Box 30423			
City Salt Lake City	State UT	ZIP Code 84130-0423	

Outstanding Balance Beginning This Period 7727.99		<b>Transaction ID:</b> LS81208.E16285	
Amount Incurred This Period 1245.35	Payment This Period 0.00	Outstanding Balance at Close of This Period 8839.23	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> IN Compliance Inc.			Nature of Debt (Purpose): Compliance Consulting
Mailing Address PO Box 751271			
City Las Vegas	State NV	ZIP Code 89131-	

Outstanding Balance Beginning This Period 23381.30		<b>Transaction ID:</b> LS80930.E13253	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 23381.30	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	33183.03
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Lynx Group Inc.			Nature of Debt (Purpose): Printing - OR GOP
Mailing Address 2746 Front St Ne			
City Salem	State OR	ZIP Code 97301-	

Outstanding Balance Beginning This Period <input type="text" value="493.00"/>		<b>Transaction ID:</b> LS80930.E13542	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="493.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> D.R. Johnson Lumber Co.			Nature of Debt (Purpose): Excess Levin Contribution Refund
Mailing Address PO Box 66			
City Riddle	State OR	ZIP Code 97469-	

Outstanding Balance Beginning This Period <input type="text" value="10000.00"/>		<b>Transaction ID:</b> LS80930.E13314	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10000.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> World Trade Center & Catering			Nature of Debt (Purpose): Catering/ORGOP
Mailing Address PO Box 3340			
City Portland	State OR	ZIP Code 97208-	

Outstanding Balance Beginning This Period <input type="text" value="9267.04"/>		<b>Transaction ID:</b> LS80930.E13420	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="250.00"/>	Outstanding Balance at Close of This Period <input type="text" value="9017.04"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="19510.04"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Warren Wilson			Nature of Debt (Purpose): Computer support
Mailing Address 962 62nd Court NE			
City Salem	State OR	ZIP Code 97317-	

Outstanding Balance Beginning This Period <input type="text" value="140.00"/>		<b>Transaction ID:</b> LS80930.E13417	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="140.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Complete Campaigns			Nature of Debt (Purpose): Computer Support
Mailing Address 3635 Ruffin Rd Fl 3			
City San Diego	State CA	ZIP Code 92123-1880	

Outstanding Balance Beginning This Period <input type="text" value="375.00"/>		<b>Transaction ID:</b> LS80930.E13365	
Amount Incurred This Period <input type="text" value="500.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="875.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Donald Malarkey			Nature of Debt (Purpose): Contribution Refund
Mailing Address 2495 E Nob Hill St SE			
City Salem	State OR	ZIP Code 97302-3733	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID:</b> LS90124.E16910	
Amount Incurred This Period <input type="text" value="100.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="100.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="975.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Oregon Federation of College Republicans

Nature of Debt (Purpose):  
Contribution Refund

Mailing Address PO Box 808

City State ZIP Code  
Corvallis OR 97339-0808

Outstanding Balance Beginning This Period

550.00

Transaction ID: LS81213.E16376

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

550.00

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

550.00

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

288797.27

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

30000.00

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

318797.27

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 Oregon Republican Party

NAME OF ACCOUNT OREGON FEDERAL 1706 F-Key c/o Key Bank	DATE OF RECEIPT M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 8	TOTAL AMOUNT TRANSFERRED 2331.59
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative .....		2331.59 Transaction ID: H380930.C94821
ii) Generic Voter Drive .....		Transaction ID:
iii) Exempt Activities .....		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative) .....	2331.59
TOTAL This Period (Generic Voter Drive) .....	0.00
TOTAL This Period (Exempt Activities) .....	0.00
TOTAL This Period (Direct Fundraising) .....	0.00
TOTAL This Period (Direct Candidate Support) .....	0.00
TOTAL This Period (Public Communications Referring Only to Party) .....	0.00
TOTAL This Period (Total Amount Transferred) .....	2331.59

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Textron Financial			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 40 Westminster Street			Allocated Activity or Event Year-To-Date 3604.62																						
City	State	Zip Code	Date <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>1</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> Transaction ID: H480930.E13414			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	0	1	/	2	0	0	8
M	M	/				D	D	/	Y	Y	Y	Y													
0	1	/	0	1	/	2	0	0	8																
Providence	RI	02903-																							
Purpose of Disbursement: Rent			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 21																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1297.66		2306.96		3604.62

<b>B. Full Name (Last, First, Middle Initial)</b> Warren Wilson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 962 62nd Court NE			Allocated Activity or Event Year-To-Date 4013.73																						
City	State	Zip Code	Date <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>1</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> Transaction ID: H480930.E13417			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	0	9	/	2	0	0	8
M	M	/				D	D	/	Y	Y	Y	Y													
0	1	/	0	9	/	2	0	0	8																
Salem	OR	97317-																							
Purpose of Disbursement: Computer support			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 21																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.40		89.60		140.00

<b>C. Full Name (Last, First, Middle Initial)</b> Pitney Bowes Purchase Power			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 856042			Allocated Activity or Event Year-To-Date 5492.17																						
City	State	Zip Code	Date <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>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> Transaction ID: H480930.E13421			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	0	/	2	0	0	8
M	M	/				D	D	/	Y	Y	Y	Y													
0	1	/	1	0	/	2	0	0	8																
Louisville	KY	40285-6042																							
Purpose of Disbursement: Postage - OR GOP			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 21																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
496.80		883.20		1380.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1844.86		3279.76		5124.62

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Brianne Hyder			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 7068 SW Valenta Ct			Allocated Activity or Event Year-To-Date 4112.17																						
City	State	Zip Code	Date <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>1</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> Transaction ID: H480930.E13431			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	0	9	/	2	0	0	8
M	M	/				D	D	/	Y	Y	Y	Y													
0	1	/	0	9	/	2	0	0	8																
Portland	OR	97223-2260																							
Purpose of Disbursement: Reimbursement--See below			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 21																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.44		63.00		98.44

<b>B. Full Name (Last, First, Middle Initial)</b> AT&T Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 30459			Allocated Activity or Event Year-To-Date 98.44																						
City	State	Zip Code	Date <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>1</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> Transaction ID: H480930.E13432			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	0	9	/	2	0	0	8
M	M	/				D	D	/	Y	Y	Y	Y													
0	1	/	0	9	/	2	0	0	8																
Los Angeles	CA	90030-																							
Purpose of Disbursement: Phone service			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 21 <b>[MEMO ITEM]</b> Phone service																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.44		63.00		98.44

<b>C. Full Name (Last, First, Middle Initial)</b> Pacific NW Telco			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 10200 Greenburg Road, Suite 340			Allocated Activity or Event Year-To-Date 3739.62																						
City	State	Zip Code	Date <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>1</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> Transaction ID: H480930.E13433			M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	0	9	/	2	0	0	8
M	M	/				D	D	/	Y	Y	Y	Y													
0	1	/	0	9	/	2	0	0	8																
Portland	OR	97223-																							
Purpose of Disbursement: Phone service			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 21																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.60		86.40		135.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
84.04		149.40		233.44

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Discover Corporate Card			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 30423			Allocated Activity or Event Year-To-Date 3873.73		
City Salt Lake City	State UT	Zip Code 84130-0423	Date <input type="text" value="01"/> / <input type="text" value="09"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Credit Card Payment: See below			Transaction ID: H480930.E15027		
Activity or Event Identifier: ADMINISTRATION B 21					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.28		85.83		134.11

<b>B. Full Name (Last, First, Middle Initial)</b> Office Depot			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10520 SW Cascade Ave			Allocated Activity or Event Year-To-Date 16.77		
City Portland	State OR	Zip Code 97223-4302	Date <input type="text" value="01"/> / <input type="text" value="09"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Office supplies			Transaction ID: H480930.E12885		
Activity or Event Identifier: ADMINISTRATION B 21 [MEMO ITEM] Office supplies					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.04		10.73		16.77

<b>C. Full Name (Last, First, Middle Initial)</b> Vonage Telephone			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 23 Main St			Allocated Activity or Event Year-To-Date 117.34		
City Holmdel	State NJ	Zip Code 07733-2136	Date <input type="text" value="01"/> / <input type="text" value="09"/> / <input type="text" value="2008"/>		
Purpose of Disbursement: Phone service			Transaction ID: H480930.E14347		
Activity or Event Identifier: ADMINISTRATION B 21 [MEMO ITEM] Phone service					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.24		75.10		117.34

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.28		85.83		134.11

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Key Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1500 Edgewater St NW			Allocated Activity or Event Year-To-Date 5674.62		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Salem	OR	97304-	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Bank Fee			Transaction ID: H490103.E16640		
Activity or Event Identifier: ADMINISTRATION B 21			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Date <input type="text"/> / <input type="text"/> / <input type="text"/>			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.08		81.91		127.99

<b>B. Full Name (Last, First, Middle Initial)</b> Key Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1500 Edgewater St NW			Allocated Activity or Event Year-To-Date 5678.12		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Salem	OR	97304-	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Bank Fee			Transaction ID: H490103.E16641		
Activity or Event Identifier: ADMINISTRATION B 21			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Date <input type="text"/> / <input type="text"/> / <input type="text"/>			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.26		2.24		3.50

<b>C. Full Name (Last, First, Middle Initial)</b> CTS Holdings LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address c/o Key Bank      1500 Edgewater St NW			Allocated Activity or Event Year-To-Date 5546.63		
City	State	Zip Code	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Salem	OR	97304-	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Credit Card Fee			Transaction ID: H490103.E16642		
Activity or Event Identifier: ADMINISTRATION B 21			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Date <input type="text"/> / <input type="text"/> / <input type="text"/>			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.61		34.85		54.46

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.95		119.00		185.95

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
2044.13	3633.99	5678.12

Form/Schedule: **F3XA**

Transaction ID:

Memo #1: Note that on Schedule D, payment in the amount of \$134.11 towards Discover Card debt is properly reflected in the Outstanding Balance at Close of This Period box, but, not in the Payment This Period box. The balance at the end of the period is correct. The Committees software contains an error that affects the proper disclosure of payments against debt when those payments require memo entries on Schedule B or H4. The Committee is working with the software vendor to resolve this issue. Memo #2: Schedule A contributions from Donald Malarkey shows a year-to-date total of \$20,100, when, in fact the total is \$10,100 due to a redesignation to a non-federal account. This is another error in the Committees software which has been brought to the vendors attention. Memo #3: Line 11(c) contains a \$1,000 receipt from Walden for Congress - this transaction is a transfer. Memo #4: Line 12 shows a receipt in the amount of \$3,008 from the Gordon Smith Victory Committee - All memo donors have been previously itemized.