

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Oregon Republican Party

ADDRESS (number and street) Post Office Box 789
 Check if different than previously reported. (ACC)
Salem OR 97308

2. **FEC IDENTIFICATION NUMBER** C00153031
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 12 01 2003 through 12 31 2003

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 Charles S. Oakes

Signature of Treasurer Electronically Filed by Charles S. Oakes Date 03 14 2008

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 3X** (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period: From:

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	3

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	3

	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>3</td></tr></table>	Y	Y	Y	Y	2	0	0	3		9593.97
Y	Y	Y	Y							
2	0	0	3							
(b) Cash on Hand at Beginning of Reporting Period	14588.89									
(c) Total Receipts (from Line 19)	55111.00	582055.25								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	69699.89	591649.22								
7. Total Disbursements (from Line 31)	58593.32	580542.65								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	11106.57	11106.57								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	103666.13									

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
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	3

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	3

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	36957.00	247720.68
(i) Itemized (use Schedule A)		
(ii) Unitemized	18154.00	243234.74
(iii) TOTAL (add Lines 11(a)(i) and (ii)	55111.00	490955.42
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	1793.50
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	55111.00	492748.92
12. Transfers From Affiliated/Other Party Committees	0.00	15000.00
13. All Loans Received	0.00	0.00
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	151.93
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	74154.40
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	74154.40
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	55111.00	582055.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	55111.00	507900.85

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	7894.10	100899.66
(ii) Non-Federal Share.....	14033.97	179377.04
(b) Other Federal Operating Expenditures.....	5091.00	161786.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	27019.07	442063.29
22. Transfers to Affiliated/Other Party Committees.....	6400.00	6650.00
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	100.00
(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	100.00
29. Other Disbursements.....	0.00	26496.80
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	25174.25	105232.56
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	25174.25	105232.56
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	58593.32	580542.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	44559.35	401165.61

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)	55111.00	492748.92
34. Total Contribution Refunds (from Line 28(d))	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	55111.00	492648.92
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	12985.10	262686.25
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	12985.10	262686.25

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

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

FOR LINE NUMBER: PAGE 6 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Henry Baldwin, Jr
Mailing Address 11590 NW Pacific Coast Hwy
City Seal Rock State OR Zip Code 97376
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 200.00
Date of Receipt 12 / 09 / 2003
Transaction ID: C69192
Amount of Each Receipt this Period 100.00
Receipt

B. Full Name (Last, First, Middle Initial)
Barbara Berringer
Mailing Address PO Box 40
City Cloverdale State OR Zip Code 97112
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00
Date of Receipt 12 / 30 / 2003
Transaction ID: C69435
Amount of Each Receipt this Period 25.00
Receipt

C. Full Name (Last, First, Middle Initial)
Mr. C. M. Bishop, Jr. - DECEASED
Mailing Address 10707 SW Riverside Dr
City Portland State OR Zip Code 97219
FEC ID number of contributing federal political committee. **C**
Name of Employer Pendleton Woolen Mills Occupation Vice Chairman
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00
Date of Receipt 12 / 10 / 2003
Transaction ID: C69244
Amount of Each Receipt this Period 1500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 1625.00
TOTAL This Period (last page this line number only) ►

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

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FOR LINE NUMBER: PAGE 7 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Patricia Bowie

Mailing Address 5425 Saratoga St

City Eugene State OR Zip Code 97405

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 04 / 2003

Transaction ID: C69104

Amount of Each Receipt this Period 200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Mr. Creed V. Brattain

Mailing Address 530 Fir Knoll Ln NE

City Salem State OR Zip Code 97301-3367

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

Name of Employer Brattain International Trucks Occupation Truck Dealer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 01 / 2003

Transaction ID: C68857

Amount of Each Receipt this Period 100.00

Receipt

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

Mailing Address 1122 NW Foxwood Pl

City Bend State OR Zip Code 97701-8606

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

Name of Employer Orthopedic Center of the Casca Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 02 / 2003

Transaction ID: C69012

Amount of Each Receipt this Period 250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 550.00

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

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 8 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Mr. Robert J. DeArmond

Mailing Address PO Box 3517

City State Zip Code
Central Point OR 97502-0019

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

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

Transaction ID: C69372

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 8400 SW Schiller Rd

City State Zip Code
Portland OR 97225

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 3

Transaction ID: C69112

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address 1401 Zebrawood Street

City State Zip Code
Florence OR 97439

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

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

Transaction ID: C69018

Amount of Each Receipt this Period
25.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 1125.00

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

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 9 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Michael Fahey

Mailing Address 1300 Forest Meadows Way

City State Zip Code
Lake Oswego OR 97034-1538

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

Name of Employer Occupation
Columbia Helicopters Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C69363

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 18331 Dupont Cir

City State Zip Code
Omaha NE 68130

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

Name of Employer Occupation
RNC Finance Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

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

Transaction ID: C69217

Amount of Each Receipt this Period
2.00

Receipt

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

Mailing Address 1315 Peartree Ln

City State Zip Code
Medford OR 97504

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

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

Transaction ID: C69422

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 1202.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Ms. Jean Irwin Hoffman

Mailing Address 5290 SW Landing Square

City State Zip Code
Portland OR 97239

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C69367

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 822 NW Murray PMB #242

City State Zip Code
Portland OR 97229

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

Name of Employer Self Occupation Investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C69436

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Rodney Kragness

Mailing Address 34778 Mathews Road

City State Zip Code
Eugene OR 97405

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

Name of Employer Self Occupation Investor/Developer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 3

Transaction ID: C69285

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 2100.00

TOTAL 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 11 / 36
(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)
-- REMOVED -- Dr. Gary Leaverton

Mailing Address 3414 SE Crystal Springs Blvd.

City Portland State OR Zip Code 97202-8428

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

Name of Employer S-SP-GPs, P.C. Occupation Surgeon

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 02 / 2003

Transaction ID: C69013

Amount of Each Receipt this Period 50.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Mr. Gordon Leitch

Mailing Address 885 SW Red Hills Dr

City Dundee State OR Zip Code 97115

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 12 / 05 / 2003

Transaction ID: C69115

Amount of Each Receipt this Period 5.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Mr. \$ Mrs. Wes Lematta

Mailing Address 800 NE Tenney Rd Ste 110 -103

City Vancouver State WA Zip Code 98685-2899

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

Name of Employer Columbia Helicopter Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 22 / 2003

Transaction ID: C69362

Amount of Each Receipt this Period 1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 1055.00

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

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 12 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Mr. Jim C. Lynch

Mailing Address PO Box 350

City State Zip Code
Lakeview OR 97630-0013

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

Name of Employer Occupation
Lynch & Vandenberg Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 9 / 2 0 0 3

Transaction ID: C69189

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
James J.C. Milne

Mailing Address 1312 SW 16th Avenue

City State Zip Code
Portland OR 97201

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

Name of Employer Occupation
Self Employed Realtor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C69434

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address PO Box 4246

City State Zip Code
Bend OR 97707

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: C69343

Amount of Each Receipt this Period
50.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1150.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 36

(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)
Mr. Rodman H. Peil

Mailing Address 505 Larry Ave N

City State Zip Code
Keizer OR 97303-5522

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

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

Transaction ID: C69346

Amount of Each Receipt this Period 50.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Mr. Charles P. Pitts

Mailing Address 1988 NE Harewood Pl

City State Zip Code
Hillsboro OR 97124-3342

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Hillsboro Auto Parts Company President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C69004

Amount of Each Receipt this Period 1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Haydon Spidell

Mailing Address 2107 Quail Point Cir

City State Zip Code
Medford OR 97504

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

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

Transaction ID: C69009

Amount of Each Receipt this Period 100.00

Receipt

SUBTOTAL of Receipts This Page (optional) 1150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 36
(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)
Mr. Loran L. Stewart

Mailing Address P.O. Box 10293

City State Zip Code
Eugene OR 97440-2293

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 3

Transaction ID: C69281

Amount of Each Receipt this Period
100.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Mr. William H. Stoller

Mailing Address 621 SW Morrison St Ste 425

City State Zip Code
Portland OR 97205-3828

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

Name of Employer Occupation
The Stoller Group CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 6 / 2 0 0 3

Transaction ID: C69319

Amount of Each Receipt this Period
500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
-- DECEASED -- Mr. John Todd

Mailing Address 1196 SE Hawthorne Dr.

City State Zip Code
Roseburg OR 97470-4305

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 0 9 / 2 0 0 3

Transaction ID: C69212

Amount of Each Receipt this Period
100.00

Receipt

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

TOTAL 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 15 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Daryl VanCleave

Mailing Address 6586 55th Ave NE

City Salem State OR Zip Code 97305

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

Name of Employer Self Occupation Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 16 / 2003

Transaction ID: C69299

Amount of Each Receipt this Period 100.00

Receipt

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

Mailing Address 125 Furnace Street

City Lake Oswego State OR Zip Code 97034-3954

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 12 / 2003

Transaction ID: C69264

Amount of Each Receipt this Period 500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Ms. Nancy J. Wendt

Mailing Address 826 Loma Linda Dr.

City Klamath Falls State OR Zip Code 97601

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10300.00

Date of Receipt 12 / 19 / 2003

Transaction ID: C69348

Amount of Each Receipt this Period 10000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 10600.00

TOTAL 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 16 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Richard L. Wendt
 Mailing Address 826 Loma Linda Dr
 City State Zip Code
 Klamath Falls OR 97601-2360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 JELD-WEN, Inc. CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 15000.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 9 / 2 0 0 3
Transaction ID: C69324
 Amount of Each Receipt this Period
 15000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Mr. Edward S. White
 Mailing Address 12045 SE 147th Ave
 City State Zip Code
 Portland OR 97236-5845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Jay-D Cold Storage Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 4 / 2 0 0 3
Transaction ID: C69053
 Amount of Each Receipt this Period
 100.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Ms. Grace K. Williams
 Mailing Address P.O. Box 307
 City State Zip Code
 Canyon City OR 97820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Grace K. Williams Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 215.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 0 / 2 0 0 3
Transaction ID: C69395
 Amount of Each Receipt this Period
 50.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► **15150.00**
TOTAL 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 17 / 36
(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) Mr. Chas S. Wilson		Date of Receipt MM / DD / YYYY 12 / 04 / 2003
Mailing Address 3933 NW Clarence Circle		Transaction ID: C69052
City Corvallis	State OR	Zip Code 97330-6548
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Wilson Motors	Occupation Auto Dealer	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

B.

Full Name (Last, First, Middle Initial) James Young		Date of Receipt MM / DD / YYYY 12 / 19 / 2003
Mailing Address PO Box 39		Transaction ID: C69358
City Lebanon	State OR	Zip Code 97355-0039
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Entek	Occupation President	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Leo Zupan		Date of Receipt MM / DD / YYYY 12 / 08 / 2003
Mailing Address 1115 Barrington Cir		Transaction ID: C69176
City Ashland	State OR	Zip Code 97520-9551
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self	Occupation Real Estate Broker	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	36957.00

**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)

PAGE 19 / 36

<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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
SC Networking

Mailing Address PO Box 1109

City Molalla State OR Zip Code 97038-

Purpose of Disbursement
website work/OGOP

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: E9071

Date of Disbursement

12 / 19 / 2003

Amount of Each Disbursement this Period

1686.00

WEBSITE WORK/OGOP

SUBTOTAL of Disbursements This Page (optional)

1686.00

TOTAL This Period (last page this line number only)

5091.00

**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)

PAGE 20 / 36

<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: E9036
Date of Disbursement

Mailing Address Key Bank NonFederal Acct
1500 Edgewater St NW

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	0		2	0	0	3

City Salem State OR Zip Code 97302-

Amount of Each Disbursement this Period

Purpose of Disbursement
transfer to non-federal acct.

--

400.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

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

Transaction ID: E9046
Date of Disbursement

Mailing Address Key Bank NonFederal Acct
1500 Edgewater St NW

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	7		2	0	0	3

City Salem State OR Zip Code 97302-

Amount of Each Disbursement this Period

Purpose of Disbursement
re-allocation for Wendt check

--

6000.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

6400.00

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

6400.00

**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)

<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) Michelle Ashenfelter	Transaction ID: E9048 Date of Disbursement 12 / 01 / 2003
	Mailing Address 2012 NE 15th	Amount of Each Disbursement this Period 1554.80
	City Portland State OR Zip Code 97212-	
	Purpose of Disbursement FEA payroll	Category/ Type
	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) ▼
		FEA PAYROLL

B.	Full Name (Last, First, Middle Initial) Michelle Ashenfelter	Transaction ID: E9060 Date of Disbursement 12 / 15 / 2003
	Mailing Address 2012 NE 15th	Amount of Each Disbursement this Period 1554.80
	City Portland State OR Zip Code 97212-	
	Purpose of Disbursement FEA payroll	Category/ Type
	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) ▼
		FEA PAYROLL

C.	Full Name (Last, First, Middle Initial) Michelle Ashenfelter	Transaction ID: E9069 Date of Disbursement 12 / 19 / 2003
	Mailing Address 2012 NE 15th	Amount of Each Disbursement this Period 3810.05
	City Portland State OR Zip Code 97212-	
	Purpose of Disbursement FEA 3RD QUARTER BONUS	Category/ Type
	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) ▼
		FEA 3RD QUARTER BONUS

SUBTOTAL of Disbursements This Page (optional)	6919.65
TOTAL This Period (last page this line number only)	

**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) Direct Mail Systems, Inc	Transaction ID: E9055 Date of Disbursement
	Mailing Address 12450 Automobile Boulevard	<input type="text" value="12"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="03"/>
	City Clearwater State FL Zip Code 34622-	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA fundraising mail	<input type="text" value="4658.68"/>
	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 FUNDRAISING MAIL

B.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: E9056 Date of Disbursement
	Mailing Address 7320 N Dreamy Draw Dr	<input type="text" value="12"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="03"/>
	City Phoenix State AZ Zip Code 85020-5212	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA telemarketing	<input type="text" value="1196.00"/>
	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 TELEMARKETING

C.	Full Name (Last, First, Middle Initial) Sandy Howard	Transaction ID: E9050 Date of Disbursement
	Mailing Address PO Box 1083	<input type="text" value="12"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="03"/>
	City Salem State OR Zip Code 97308-	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA payroll	<input type="text" value="1145.00"/>
	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

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6999.68"/>
TOTAL 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)

<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) Sandy Howard	Transaction ID: E9062 Date of Disbursement 12 / 15 / 2003
	Mailing Address PO Box 1083	Amount of Each Disbursement this Period 1145.67
	City Salem State OR Zip Code 97308-	
	Purpose of Disbursement FEA payroll 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

B.	Full Name (Last, First, Middle Initial) Key Bank**	Transaction ID: E9064 Date of Disbursement 12 / 17 / 2003
	Mailing Address 1500 Edgewater St NW	Amount of Each Disbursement this Period 4203.76
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement FEA payroll tax 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 TAX

C.	Full Name (Last, First, Middle Initial) Amy Langdon	Transaction ID: E9049 Date of Disbursement 12 / 01 / 2003
	Mailing Address 2830 Foxhaven Dr SE	Amount of Each Disbursement this Period 2059.86
	City Salem State OR Zip Code 97306-2526	
	Purpose of Disbursement FEA payroll 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

SUBTOTAL of Disbursements This Page (optional)	7409.29
TOTAL This Period (last page this line number only)	

**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) Amy Langdon	Transaction ID: E9061 Date of Disbursement 12 / 15 / 2003
	Mailing Address 2830 Foxhaven Dr SE	Amount of Each Disbursement this Period 2059.85
	City Salem State OR Zip Code 97306-2526	
	Purpose of Disbursement FEA payroll 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

B.	Full Name (Last, First, Middle Initial) Oregon Department of Revenue	Transaction ID: E9051 Date of Disbursement 12 / 01 / 2003
	Mailing Address PO Box 14800	Amount of Each Disbursement this Period 381.89
	City Salem State OR Zip Code 97309-	
	Purpose of Disbursement FEA payroll 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: E9065 Date of Disbursement 12 / 17 / 2003
	Mailing Address PO Box 14800	Amount of Each Disbursement this Period 1022.00
	City Salem State OR Zip Code 97309-	
	Purpose of Disbursement FEA payroll tax 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 TAX

SUBTOTAL of Disbursements This Page (optional)	3463.74
TOTAL This Period (last page this line number only)	

**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)

PAGE 25 / 36

<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)
Oregon Department of Revenue

Mailing Address PO Box 14800

City Salem State OR Zip Code 97309-

Purpose of Disbursement
FEA payroll tax

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: E9070

Date of Disbursement

12 / 19 / 2003

Amount of Each Disbursement this Period

381.89

FEA PAYROLL TAX

SUBTOTAL of Disbursements This Page (optional)

381.89

TOTAL This Period (last page this line number only)

25174.25

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 Advanced Office Systems			Nature of Debt (Purpose): for audit /pregen
Mailing Address P.O. Box 1193			
City Tualatin	State OR	ZIP Code 97062-1193	

Outstanding Balance Beginning This Period <input type="text" value="626.04"/>		Transaction ID: LSE11185	
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="626.04"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Amy Langdon			Nature of Debt (Purpose): reim for catering parking meals
Mailing Address 2830 Foxhaven Dr SE			
City Salem	State OR	ZIP Code 97306-2526	

Outstanding Balance Beginning This Period <input type="text" value="1583.54"/>		Transaction ID: LSE8968	
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="1583.54"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Creative Strategies			Nature of Debt (Purpose): voter registration work
Mailing Address 9 Monroe Parkway, Suite 120			
City Lake Oswego	State OR	ZIP Code 97035-	

Outstanding Balance Beginning This Period <input type="text" value="3355.38"/>		Transaction ID: LSE9074	
Amount Incurred This Period <input type="text" value="8000.00"/>	Payment This Period <input type="text" value="8000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3355.38"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="5564.96"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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 FLS Connect			Nature of Debt (Purpose): FEA telemarketing
Mailing Address 7320 N Dreamy Draw Dr			
City Phoenix	State AZ	ZIP Code 85020-5212	

Outstanding Balance Beginning This Period 39504.10		Transaction ID: LSE9056	
Amount Incurred This Period 0.00	Payment This Period 1896.00	Outstanding Balance at Close of This Period 37608.10	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct Mail Systems, Inc			Nature of Debt (Purpose): general direct mail
Mailing Address 12450 Automobile Boulevard			
City Clearwater	State FL	ZIP Code 34622-	

Outstanding Balance Beginning This Period 35267.68		Transaction ID: LSE9055	
Amount Incurred This Period 8859.73	Payment This Period 4658.68	Outstanding Balance at Close of This Period 39468.73	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Norton & Butler CPA			Nature of Debt (Purpose): CPA services
Mailing Address PO Box 12873			
City Salem	State OR	ZIP Code 97309-	

Outstanding Balance Beginning This Period 1630.00		Transaction ID: LSE9079	
Amount Incurred This Period 440.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2070.00	

1) SUBTOTALS This Period This Page (optional).....	79146.83
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) 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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pitney Bowes Credit Corp			Nature of Debt (Purpose): postage machine payment
Mailing Address P. O. Box 85460			
City Louisville	State KY	ZIP Code 40285-5460	

Outstanding Balance Beginning This Period 1135.10		Transaction ID: LSE9080	
Amount Incurred This Period 816.87	Payment This Period 0.00	Outstanding Balance at Close of This Period 1951.97	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Reed Harris Mailhouse			Nature of Debt (Purpose): fundraising mail
Mailing Address 322 NW 14th			
City Portland	State OR	ZIP Code 97210-	

Outstanding Balance Beginning This Period 3285.12		Transaction ID: LSE9067	
Amount Incurred This Period 0.00	Payment This Period 1705.00	Outstanding Balance at Close of This Period 1580.12	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor QWest**			Nature of Debt (Purpose): phone bill
Mailing Address PO Box 12480			
City Seattle	State WA	ZIP Code 98111-	

Outstanding Balance Beginning This Period 693.91		Transaction ID: LSE9081	
Amount Incurred This Period 304.24	Payment This Period 0.00	Outstanding Balance at Close of This Period 998.15	

1) SUBTOTALS This Period This Page (optional).....	▶	4530.24
2) TOTALS This Period (last page this line number only).....	▶	[]
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	[]
4) ADD 2) and 3) 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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor WB Adams Insurance Co			Nature of Debt (Purpose): liability insurance
Mailing Address 6290 SW Arctic Dr			
City Beaverton	State OR	ZIP Code 97005-	

Outstanding Balance Beginning This Period <input type="text" value="2150.00"/>		Transaction ID: LS71002.E13089	
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="2150.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Premiere Conferencing			Nature of Debt (Purpose): conference calls
Mailing Address PO Box 87-5450			
City Kansas City	State MO	ZIP Code 64180-	

Outstanding Balance Beginning This Period <input type="text" value="1590.78"/>		Transaction ID: LSE8828	
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="1590.78"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Computer Village			Nature of Debt (Purpose): computer maintance
Mailing Address 4075 76th Ave NE			
City Salem	State OR	ZIP Code 97305-	

Outstanding Balance Beginning This Period <input type="text" value="-141.33"/>		Transaction ID: LSE9066	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="4580.00"/>	Outstanding Balance at Close of This Period <input type="text" value="-4721.33"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="-980.55"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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 Telecommunication Politel			Nature of Debt (Purpose): telemarketing
Mailing Address 1711 W County Rd B #330N			
City Saint Paul	State MN	ZIP Code 55113-	

Outstanding Balance Beginning This Period <input type="text" value="4500.00"/>		Transaction ID: LS70929.E13085	
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="4500.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Electric Lightwave			Nature of Debt (Purpose): auto calls generic voter ID
Mailing Address PO Box 20553			
City Rochester	State NY	ZIP Code 14602-	

Outstanding Balance Beginning This Period <input type="text" value="1139.97"/>		Transaction ID: LSE9054	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1139.97"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Certified Property			Nature of Debt (Purpose): interest on unpaid balance
Mailing Address PO Box 269			
City Salem	State OR	ZIP Code 97308-0269	

Outstanding Balance Beginning This Period <input type="text" value="3658.70"/>		Transaction ID: LSE8963	
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="3658.70"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="8158.70"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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)	PAGE 31 / 36
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fred Gabriel, PC	Nature of Debt (Purpose): CPA services
Mailing Address 2011 State	
City State ZIP Code Salem OR 97301-	

Outstanding Balance Beginning This Period -1250.00	Transaction ID: LSE11071	
Amount Incurred This Period 4400.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3150.00

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

Outstanding Balance Beginning This Period 2513.51	Transaction ID: LSE9083	
Amount Incurred This Period 666.91	Payment This Period 0.00	Outstanding Balance at Close of This Period 3180.42

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Coast Events	Nature of Debt (Purpose): event set up fees
Mailing Address 1400 NW 15th Ave	
City State ZIP Code Portland OR 97209-	

Outstanding Balance Beginning This Period 902.00	Transaction ID: LSE9084	
Amount Incurred This Period 13.53	Payment This Period 0.00	Outstanding Balance at Close of This Period 915.53

1) SUBTOTALS This Period This Page (optional).....	▶	7245.95
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) 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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Connolly & Goldian			Nature of Debt (Purpose): legal services
Mailing Address PO Box 3095			
City Salem	State OR	ZIP Code 97302-	

Outstanding Balance Beginning This Period		Transaction ID: LS71017.E13099	
16305.73			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
-16305.73	0.00	0.00	

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	103666.13
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	103666.13

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Top Communications			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 1201 SW 12th Ave			Allocated Activity or Event Year-To-Date 258392.04		
City Portland	State OR	Zip Code 97205-	Date <input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2003"/>		
Purpose of Disbursement: media session, general OGOP			Transaction ID: H4E9052		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
180.00		320.00		500.00

B. Full Name (Last, First, Middle Initial) LifeWise			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 815 SW Bond St			Allocated Activity or Event Year-To-Date 260050.04		
City Bend	State OR	Zip Code 97702-	Date <input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2003"/>		
Purpose of Disbursement: health insurance			Transaction ID: H4E9057		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
596.88		1061.12		1658.00

C. Full Name (Last, First, Middle Initial) US Postal Service			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 Liberty St			Allocated Activity or Event Year-To-Date 260074.46		
City Salem	State OR	Zip Code 97308-	Date <input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2003"/>		
Purpose of Disbursement: stamps			Transaction ID: H4E9058		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.79		15.63		24.42

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
785.67		1396.75		2182.42

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

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

A. Full Name (Last, First, Middle Initial) Certified Property			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 269			Allocated Activity or Event Year-To-Date 265691.46		
City Salem	State OR	Zip Code 97308-0269	Date MM / DD / YYYY 12 / 12 / 2003		
Purpose of Disbursement: office rent			Transaction ID: H4E9059		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2022.12		3594.88		5617.00

B. Full Name (Last, First, Middle Initial) Computer Village			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 4075 76th Ave NE			Allocated Activity or Event Year-To-Date 270271.46		
City Salem	State OR	Zip Code 97305-	Date MM / DD / YYYY 12 / 17 / 2003		
Purpose of Disbursement: computer maintance			Transaction ID: H4E9066		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1648.80		2931.20		4580.00

C. Full Name (Last, First, Middle Initial) Sandy Howard			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 1083			Allocated Activity or Event Year-To-Date 270365.25		
City Salem	State OR	Zip Code 97308-	Date MM / DD / YYYY 12 / 18 / 2003		
Purpose of Disbursement: reim for cell phone, mileage			Transaction ID: H4E9068		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.76		60.03		93.79

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3704.68		6586.11		10290.79

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

A. Full Name (Last, First, Middle Initial) 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 270656.14		
City Salem	State OR	Zip Code 97304-	Date <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="3"/>		
Purpose of Disbursement: bank fee			Transaction ID: H4E9072		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
104.72		186.17		290.89

B. Full Name (Last, First, Middle Initial) 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 270680.14		
City Salem	State OR	Zip Code 97304-	Date <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="3"/>		
Purpose of Disbursement: bank fee			Transaction ID: H4E9073		
Activity or Event Identifier: ADMINISTRATION B 2111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.64		15.36		24.00

C. Full Name (Last, First, Middle Initial) Electric Lightwave			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input checked="" 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 20553			Allocated Activity or Event Year-To-Date 9596.56		
City Rochester	State NY	Zip Code 14602-	Date <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="3"/>		
Purpose of Disbursement: auto calls, generic voter ID			Transaction ID: H4E9054		
Activity or Event Identifier: GV GENERICVOTER DRIVE					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
410.39		729.58		1139.97

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
523.75		931.11		1454.86

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

A. Full Name (Last, First, Middle Initial)
Creative Strategies

Mailing Address
9 Monroe Parkway, Suite 120

City	State	Zip Code
Lake Oswego	OR	97035-

Purpose of Disbursement:
voter registration mail/generic

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

8456.59

Activity or Event Identifier:
GV GENERICVOTER DRIVE

Date 12 / 02 / 2003

Transaction ID: H4E9074

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2880.00		5120.00		8000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2880.00		5120.00		8000.00

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
7894.10	14033.97	21928.07