

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 05 01 2005 through 05 31 2005

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 12 17 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									
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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
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	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>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5		42748.71
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period	44535.04									
(c) Total Receipts (from Line 19)	17810.50	178549.22								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	62345.54	221297.93								
7. Total Disbursements (from Line 31)	22479.57	181431.96								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	39865.97	39865.97								
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)	88687.39									

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	5

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	5

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	8937.50	26897.50
(i) Itemized (use Schedule A)	8873.00	100489.93
(ii) Unitemized	17810.50	127387.43
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	17810.50	127387.43
12. Transfers From Affiliated/Other Party Committees	0.00	17461.16
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	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	33700.63
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	33700.63
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	17810.50	178549.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17810.50	144848.59

DETAILED SUMMARY PAGE

of Disbursements

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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.....	1301.03	9800.64
(ii) Non-Federal Share.....	7372.44	54398.39
(b) Other Federal Operating Expenditures.....	1260.00	42396.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	9933.47	106595.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	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	12546.10	64836.03
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	12546.10	64836.03
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	22479.57	181431.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15107.13	127033.57

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)	17810.50	127387.43
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17810.50	127387.43
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2561.03	52197.54
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2561.03	52197.54

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.....	10.75	74.50
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	10.75	74.50
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	946.25	1010.00
8. RECEIPTS..... (from Line 3)	0.00	0.00
9. SUBTOTAL..... (Add Lines 7 and 8)	946.25	1010.00
10. DISBURSEMENTS..... (From Line 6)	10.75	74.50
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	935.50	935.50

**SCHEDULE L-B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
OF LEVIN FUNDS**

Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)		PAGE 7 / 23
	<input type="checkbox"/> 4a	<input type="checkbox"/> 4c	<input checked="" type="checkbox"/> 5
	<input type="checkbox"/> 4b	<input type="checkbox"/> 4d	

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) / Full Organization Name Key Bank**	Transaction ID: 4B80930.E11626 Date of Disbursement
	Mailing Address 1500 Edgewater St NW	<input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="31"/> <input type="text" value="31"/> / <input type="text" value="2005"/> <input type="text" value="2005"/>
	City State Zip Code Salem OR 97304	Amount of Each Disbursement this Period <input type="text" value="10.75"/>
	Purpose of Disbursement Bank Fee	Account: 8

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="10.75"/>
TOTAL This Period (last page this line number only)	<input type="text" value="10.75"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 23
(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>A. Full Name (Last, First, Middle Initial) Norman Brenden</p> <p>Mailing Address 12344 Paradise Alley Rd NE</p> <p>City State Zip Code Silverton OR 97381-9369</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Harvest Development Senior VP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 625.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2005</p> <p>Transaction ID: 80930.C83439</p> <p>Amount of Each Receipt this Period 625.00</p> <p>Receipt</p>
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<p>B. Full Name (Last, First, Middle Initial) Barbara Marsh</p> <p>Mailing Address 1004 Commercial Ave # 442</p> <p>City State Zip Code Anacortes WA 98221-4117</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Information Requested Information Requested</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 312.50</p>	<p>Date of Receipt M M / D D / Y Y Y Y 05 / 13 / 2005</p> <p>Transaction ID: 80930.C83440</p> <p>Amount of Each Receipt this Period 312.50</p> <p>Receipt</p>
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<p>C. Full Name (Last, First, Middle Initial) Eva Swain</p> <p>Mailing Address PO Box 330</p> <p>City State Zip Code Hood River OR 97031-0067</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Swain Motors Automobile Dealers</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5725.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2005</p> <p>Transaction ID: 80930.C83332</p> <p>Amount of Each Receipt this Period 5000.00</p> <p>Receipt</p>
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SUBTOTAL of Receipts This Page (optional)	5937.50
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 9 / 23
	(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)
Donna Woolley

Mailing Address PO Box 43

City State Zip Code
Drain OR 97435-0043

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

Name of Employer Occupation
Eagles View Management CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 7 / 2 0 0 5

Transaction ID: 80930.C96909

Amount of Each Receipt this Period
3000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	8937.50

**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 10 / 23

<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)
Direct Mail Systems, Inc

Transaction ID: 80930.E11596

Date of Disbursement

Mailing Address 12450 Automobile Boulevard

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	0	5

City Clearwater State FL Zip Code 34622-

Amount of Each Disbursement this Period

1260.00

Purpose of Disbursement
List Management Service OGOP

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

LIST MANAGEMENT SERVICE
OGOP

State: District:

SUBTOTAL of Disbursements This Page (optional)

1260.00

TOTAL This Period (last page this line number only)

1260.00

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 11 / 23

<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

<p>A. Full Name (Last, First, Middle Initial) Leisha Adams</p> <p>Mailing Address 300 S Everest Rd Unit 39</p> <p>City Newberg State OR Zip Code 97132-2171</p> <p>Purpose of Disbursement FEA payroll</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>Transaction ID: 80930.E11572</p> <p>Date of Disbursement 05 / 02 / 2005</p> <p>Amount of Each Disbursement this Period 578.35</p> <p>FEA PAYROLL</p>
<p>B. Full Name (Last, First, Middle Initial) Michelle Ashenfelter</p> <p>Mailing Address 2012 NE 15th</p> <p>City Portland State OR Zip Code 97212-</p> <p>Purpose of Disbursement FEA payroll</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>Transaction ID: 80930.E11579</p> <p>Date of Disbursement 05 / 02 / 2005</p> <p>Amount of Each Disbursement this Period 1541.88</p> <p>FEA PAYROLL</p>
<p>C. Full Name (Last, First, Middle Initial) Michelle Ashenfelter</p> <p>Mailing Address 2012 NE 15th</p> <p>City Portland State OR Zip Code 97212-</p> <p>Purpose of Disbursement FEA payroll</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>Transaction ID: 80930.E11582</p> <p>Date of Disbursement 05 / 13 / 2005</p> <p>Amount of Each Disbursement this Period 1562.94</p> <p>FEA PAYROLL</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3683.17

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 12 / 23

<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

<p>A. Full Name (Last, First, Middle Initial) Key Bank**</p> <p>Mailing Address 1500 Edgewater St NW</p> <p>City Salem State OR Zip Code 97304-</p> <p>Purpose of Disbursement FEA payroll taxes</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>Transaction ID: 80930.E11580 Date of Disbursement 05 / 02 / 2005</p> <p>Amount of Each Disbursement this Period 1996.00</p> <p>FEA PAYROLL TAXES</p>
<p>B. Full Name (Last, First, Middle Initial) Key Bank**</p> <p>Mailing Address 1500 Edgewater St NW</p> <p>City Salem State OR Zip Code 97304-</p> <p>Purpose of Disbursement FEA payroll taxes</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>Transaction ID: 80930.E11584 Date of Disbursement 05 / 13 / 2005</p> <p>Amount of Each Disbursement this Period 1811.04</p> <p>FEA PAYROLL TAXES</p>
<p>C. Full Name (Last, First, Middle Initial) Amy Langdon</p> <p>Mailing Address 2830 Foxhaven Dr SE</p> <p>City Salem State OR Zip Code 97306-2526</p> <p>Purpose of Disbursement FEA Payroll</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>Transaction ID: 80930.E11571 Date of Disbursement 05 / 02 / 2005</p> <p>Amount of Each Disbursement this Period 2046.95</p> <p>FEA PAYROLL</p>

SUBTOTAL of Disbursements This Page (optional)	5853.99
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)

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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) Amy Langdon Mailing Address 2830 Foxhaven Dr SE City Salem State OR Zip Code 97306-2526 Purpose of Disbursement 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) ▼	Transaction ID: 80930.E11583 Date of Disbursement 05 / 13 / 2005 Amount of Each Disbursement this Period 2069.94 FEA PAYROLL
B.	Full Name (Last, First, Middle Initial) Oregon Department of Revenue Mailing Address P.O. Box 14800 City Salem State OR Zip Code 97309-0920 Purpose of Disbursement FEA payroll taxes 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) ▼	Transaction ID: 80930.E14426 Date of Disbursement 05 / 02 / 2005 Amount of Each Disbursement this Period 510.00 FEA PAYROLL TAXES
C.	Full Name (Last, First, Middle Initial) Oregon Department of Revenue Mailing Address P.O. Box 14800 City Salem State OR Zip Code 97309-0920 Purpose of Disbursement FEA payroll taxes 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) ▼	Transaction ID: 80930.E14427 Date of Disbursement 05 / 13 / 2005 Amount of Each Disbursement this Period 429.00 FEA PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional) ▶

3008.94

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

12546.10

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 Aristotle	Nature of Debt (Purpose): Computer Support
Mailing Address 205 Pennsylvania Ave SE	
City State ZIP Code Washington DC 20003-	

Outstanding Balance Beginning This Period 1950.00	Transaction ID: LS80930.E9875	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1950.00

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

Outstanding Balance Beginning This Period 6854.40	Transaction ID: LS80930.E11629	
Amount Incurred This Period 745.20	Payment This Period 0.00	Outstanding Balance at Close of This Period 7599.60

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct Mail Systems, Inc	Nature of Debt (Purpose): List Management Service OGOP
Mailing Address 12450 Automobile Boulevard	
City State ZIP Code Clearwater FL 34622-	

Outstanding Balance Beginning This Period 3654.78	Transaction ID: LS80930.E11596	
Amount Incurred This Period 4268.28	Payment This Period 1260.00	Outstanding Balance at Close of This Period 6663.06

1) SUBTOTALS This Period This Page (optional).....	▶	16212.66
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 Oregon State Fair			Nature of Debt (Purpose): Facility Rental OGOP
Mailing Address 2330 17th St NE			
City Salem	State OR	ZIP Code 97310-	

Outstanding Balance Beginning This Period <input type="text" value="855.00"/>		Transaction ID: LS80930.E11561	
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="855.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPS			Nature of Debt (Purpose): Delivery
Mailing Address Lockbox 577			
City Carol Stream	State IL	ZIP Code 60132-0577	

Outstanding Balance Beginning This Period <input type="text" value="64.32"/>		Transaction ID: LS80930.E11586	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="64.32"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Electric Lightwave			Nature of Debt (Purpose): Phone Service
Mailing Address PO Box 20553			
City Rochester	State NY	ZIP Code 14602-	

Outstanding Balance Beginning This Period <input type="text" value="637.82"/>		Transaction ID: LS80930.E11590	
Amount Incurred This Period <input type="text" value="318.87"/>	Payment This Period <input type="text" value="637.82"/>	Outstanding Balance at Close of This Period <input type="text" value="318.87"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1173.87"/>
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 16 / 23
	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 X5 Solutions	Nature of Debt (Purpose): Phone Service
Mailing Address 1520 4th Ave Ste 500	
City State ZIP Code Seattle WA 98101-3609	

Outstanding Balance Beginning This Period <input type="text" value="167.06"/>	Transaction ID: LS80930.E11591	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="167.06"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Entertainment Communications Network	Nature of Debt (Purpose): List Management Service OGOP
Mailing Address 4370 Tujunga Ave Suite 210	
City State ZIP Code Studio City CA 91604-	

Outstanding Balance Beginning This Period <input type="text" value="1131.35"/>	Transaction ID: LS81002.E15131	
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="1131.35"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Stafford Studios	Nature of Debt (Purpose): Web Service
Mailing Address 11594 SE Meadowgold Place	
City State ZIP Code Clackamas OR 97015-	

Outstanding Balance Beginning This Period <input type="text" value="300.00"/>	Transaction ID: LS80930.E11587	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="300.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1131.35"/>
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 Capitol Accounting Service			Nature of Debt (Purpose): Compliance Consulting
Mailing Address PO Box 1304			
City Silverton	State OR	ZIP Code 97381-	

Outstanding Balance Beginning This Period 1207.50		Transaction ID: LS80930.E11588	
Amount Incurred This Period 0.00	Payment This Period 937.50	Outstanding Balance at Close of This Period 270.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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 67180.90		Transaction ID: LS80930.E11336	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 67180.90	

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

Outstanding Balance Beginning This Period 1112.50		Transaction ID: LS80930.E13083	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1112.50	

1) SUBTOTALS This Period This Page (optional).....	▶	68563.40
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 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 1208.89		Transaction ID: LS80930.E11589	
Amount Incurred This Period 612.20	Payment This Period 598.98	Outstanding Balance at Close of This Period 1222.11	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Elsinore Gallery & Framing			Nature of Debt (Purpose): Office Supplies
Mailing Address 142 High St SE			
City Salem	State OR	ZIP Code 97301-3608	

Outstanding Balance Beginning This Period 185.00		Transaction ID: LS81006.E15135	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 185.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Key Corporate Card			Nature of Debt (Purpose): Office Supplies
Mailing Address PO Box 9004			
City Des Moines	State IA	ZIP Code 50368-9004	

Outstanding Balance Beginning This Period 0.00		Transaction ID: LS81104.E15747	
Amount Incurred This Period 199.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 199.00	

1) SUBTOTALS This Period This Page (optional).....	▶	1606.11
2) TOTALS This Period (last page this line number only).....	▶	88687.39
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)	▶	88687.39

**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) DH & Associates			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 57350.51		
City	State	Zip Code	Date <input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2005"/> Transaction ID: H480930.E11573		
Salem	OR	97308-			
Purpose of Disbursement: Compliance Consulting			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 4111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
375.00		2125.00		2500.00

B. Full Name (Last, First, Middle Initial) UPS			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 Lockbox 577			Allocated Activity or Event Year-To-Date 58662.33		
City	State	Zip Code	Date <input type="text" value="05"/> / <input type="text" value="18"/> / <input type="text" value="2005"/> Transaction ID: H480930.E11586		
Carol Stream	IL	60132-0577			
Purpose of Disbursement: Delivery			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 4111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.65		54.67		64.32

C. Full Name (Last, First, Middle Initial) Stafford Studios			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 11594 SE Meadowgold Place			Allocated Activity or Event Year-To-Date 57660.51		
City	State	Zip Code	Date <input type="text" value="05"/> / <input type="text" value="13"/> / <input type="text" value="2005"/> Transaction ID: H480930.E11587		
Clackamas	OR	97015-			
Purpose of Disbursement: Web Service			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 4111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.00		255.00		300.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
429.65		2434.67		2864.32

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)
Capitol Accounting Service

Mailing Address
PO Box 1304

City	State	Zip Code
Silverton	OR	97381-

Purpose of Disbursement:
Compliance Consulting

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

58598.01

Activity or Event Identifier:
ADMINISTRATION B 4111

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	3	/	2	0	0	5

Transaction ID: H480930.E11588

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
140.63		796.87		937.50

B. Full Name (Last, First, Middle Initial)
Integra Telecom

Mailing Address
PO Box 34988

City	State	Zip Code
Seattle	WA	98124-1988

Purpose of Disbursement:
Phone Service

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

62852.29

Activity or Event Identifier:
ADMINISTRATION B 4111

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	3	/	2	0	0	5

Transaction ID: H480930.E11589

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
89.85		509.13		598.98

C. Full Name (Last, First, Middle Initial)
Electric Lightwave

Mailing Address
PO Box 20553

City	State	Zip Code
Rochester	NY	14602-

Purpose of Disbursement:
Phone Service

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

59300.15

Activity or Event Identifier:
ADMINISTRATION B 4111

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	3	/	2	0	0	5

Transaction ID: H480930.E11590

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
95.67		542.15		637.82

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
326.15		1848.15		2174.30

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) X5 Solutions			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 1520 4th Ave Ste 500			Allocated Activity or Event Year-To-Date 59467.21																		
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>5</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>3</td></tr></table> / <table border="1"><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>5</td></tr></table>			M	M	0	5	D	D	2	3	Y	Y	Y	Y	2	0	0	5
M	M																				
0	5																				
D	D																				
2	3																				
Y	Y	Y	Y																		
2	0	0	5																		
Seattle	WA	98101-3609																			
Purpose of Disbursement: Phone Service			Transaction ID: H480930.E11591																		
Activity or Event Identifier: ADMINISTRATION B 4111																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.06		142.00		167.06

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 59753.31																		
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>5</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>3</td></tr></table> / <table border="1"><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>5</td></tr></table>			M	M	0	5	D	D	2	3	Y	Y	Y	Y	2	0	0	5
M	M																				
0	5																				
D	D																				
2	3																				
Y	Y	Y	Y																		
2	0	0	5																		
Bend	OR	97702-																			
Purpose of Disbursement: Insurance			Transaction ID: H480930.E11592																		
Activity or Event Identifier: ADMINISTRATION B 4111																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.92		243.18		286.10

C. Full Name (Last, First, Middle Initial) DH & Associates			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 62253.31																		
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>5</td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>3</td></tr></table> / <table border="1"><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>5</td></tr></table>			M	M	0	5	D	D	2	3	Y	Y	Y	Y	2	0	0	5
M	M																				
0	5																				
D	D																				
2	3																				
Y	Y	Y	Y																		
2	0	0	5																		
Salem	OR	97308-																			
Purpose of Disbursement: Compliance Consulting			Transaction ID: H480930.E11594																		
Activity or Event Identifier: ADMINISTRATION B 4111																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
375.00		2125.00		2500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
442.98		2510.18		2953.16

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) Michelle Ashenfelter			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 2012 NE 15th			Allocated Activity or Event Year-To-Date 63384.91	
City Portland	State OR	Zip Code 97212-	Date M M / D D / Y Y Y Y 05 / 26 / 2005 Transaction ID: H480930.E11595	
Purpose of Disbursement: Phone Expense				
Activity or Event Identifier: ADMINISTRATION B 4111				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
79.89		452.73		532.62

B. Full Name (Last, First, Middle Initial) Authnet Gateway Billing			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 293 Boston Post Rd W Ste 220			Allocated Activity or Event Year-To-Date 54850.51	
City Marlborough	State MA	Zip Code 01752-	Date M M / D D / Y Y Y Y 05 / 03 / 2005 Transaction ID: H481007.E15138	
Purpose of Disbursement: Credit Card Fee				
Activity or Event Identifier: ADMINISTRATION B 4111				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.50		8.50		10.00

C. Full Name (Last, First, Middle Initial) 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 54840.51	
City Salt Lake City	State UT	Zip Code 84130-0423	Date M M / D D / Y Y Y Y 05 / 03 / 2005 Transaction ID: H481007.E15139	
Purpose of Disbursement: Credit Card Fee				
Activity or Event Identifier: ADMINISTRATION B 4111				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.21		108.86		128.07

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.60		570.09		670.69

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) 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 57360.51		
City State Zip Code Salem OR 97304-	Category/ Type		Date M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 5		
Purpose of Disbursement: Credit Card Fee			Transaction ID: H481007.E15141		
Activity or Event Identifier: ADMINISTRATION B 4111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.50		8.50		10.00

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 63385.91		
City State Zip Code Salem OR 97304-	Category/ Type		Date M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 5		
Purpose of Disbursement: Bank Fee			Transaction ID: H481007.E15142		
Activity or Event Identifier: ADMINISTRATION B 4111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.15		0.85		1.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.65		9.35		11.00

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
1301.03		7372.44		8673.47