

# 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 09 01 2005 through 09 30 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 **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Oregon Republican Party

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To: 

M	M
0	9

D	D
3	0

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 .....	12929.22									
(c) Total Receipts (from Line 19) .....	36158.00	279034.22								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	49087.22	321782.93								
7. Total Disbursements (from Line 31) .....	36553.60	309249.31								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	12533.62	12533.62								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	103911.41									

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	9

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To: 

M	M
0	9

D	D
3	0

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	20576.00	75887.50
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	15482.00	151884.93
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	36058.00	227772.43
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	100.00	100.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	36158.00	227872.43
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)) .....	36158.00	279034.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	36158.00	245333.59

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	1716.96	16305.39
(ii) Non-Federal Share.....	9729.29	91258.34
(b) Other Federal Operating Expenditures.....	15107.16	69450.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	26553.41	177014.33
22. Transfers to Affiliated/Other Party Committees.....	0.00	15000.00
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 .....	10000.19	117234.98
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	10000.19	117234.98
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	36553.60	309249.31
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26824.31	217990.97

**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) .....	36158.00	227872.43
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	36158.00	227872.43
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	16824.12	85755.99
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	16824.12	85755.99

**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	117.50
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	10.75	117.50
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	903.25	1010.00
8. RECEIPTS..... (from Line 3)	0.00	0.00
9. SUBTOTAL..... (Add Lines 7 and 8)	903.25	1010.00
10. DISBURSEMENTS..... (From Line 6)	10.75	117.50
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	892.50	892.50

**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 / 34
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) / Full Organization Name Key Bank**	<b>Transaction ID:</b> 4B81017.E15280
	Mailing Address 1500 Edgewater St NW	Date of Disbursement 09 / 30 / 2005
	City Salem State OR Zip Code 97304	Amount of Each Disbursement this Period 10.75
	Purpose of Disbursement Bank Fee	<b>Account:</b> 8

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	10.75
<b>TOTAL</b> This Period (last page this line number only) .....	▶	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 / 34  
(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)  
Nina Avery

Mailing Address PO Box 580

City State Zip Code  
Junction City OR 97448-0580

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 242.00

Date of Receipt 09 / 25 / 2005  
**Transaction ID:** 80930.C85408

Amount of Each Receipt this Period 192.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Charles Carlson

Mailing Address 1311 Victorian Way

City State Zip Code  
Eugene OR 97401-7020

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 ▼ 400.00

Date of Receipt 09 / 30 / 2005  
**Transaction ID:** 80930.C84970

Amount of Each Receipt this Period 200.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Lynn Buck Compton

Mailing Address 12359 Rainier Dr

City State Zip Code  
Burlington WA 98233-2793

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 ▼ 1370.00

Date of Receipt 09 / 24 / 2005  
**Transaction ID:** 80930.C85392

Amount of Each Receipt this Period 1370.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 1762.00

**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: (check only one)	PAGE 9 / 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b>	Full Name (Last, First, Middle Initial) Alan DeBoer		Date of Receipt MM / DD / YYYY 09 / 26 / 2005		
	Mailing Address 2260 Morada Lane		<b>Transaction ID:</b> 80930.C85410		
	City Ashland	State OR	Zip Code 97520	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		Receipt		
	Name of Employer Town & Country Car Dealership	Occupation Car Dealer	Aggregate Year-to-Date 500.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) George Edward Glass		Date of Receipt MM / DD / YYYY 09 / 08 / 2005		
	Mailing Address 16715 Pahntom Bluff Ct.		<b>Transaction ID:</b> 80930.C85119		
	City Lake Oswego	State OR	Zip Code 97034-5753	Amount of Each Receipt this Period 5000.00	
	FEC ID number of contributing federal political committee. C		Receipt		
	Name of Employer Pacific Crest Securities	Occupation CEO	Aggregate Year-to-Date 5000.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Lee Golder		Date of Receipt MM / DD / YYYY 09 / 25 / 2005		
	Mailing Address 2541 Sheridan Ave		<b>Transaction ID:</b> 80930.C85406		
	City North Bend	State OR	Zip Code 97459-3249	Amount of Each Receipt this Period 192.00	
	FEC ID number of contributing federal political committee. C		Receipt		
	Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date 242.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5692.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 34  
(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)  
Eliot Jenkins

Mailing Address 13169 SE River Rd Apt 307T

City State Zip Code  
Portland OR 97222-9789

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

Name of Employer Retired      Occupation Retired

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      350.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	2	/	2	0	0	5

**Transaction ID:** 81017.C97595

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Jim 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 Lynch & Vandenberg      Occupation Attorney

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	2	/	2	0	0	5

**Transaction ID:** 80930.C85301

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
J. Douglas McKay

Mailing Address 450 Stonegate St.

City State Zip Code  
Eugene OR 97401

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

Name of Employer Information Requested      Occupation Information Requested

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	0	/	2	0	0	5

**Transaction ID:** 80930.C85232

Amount of Each Receipt this Period  
500.00

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 11 / 34
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b>	Full Name (Last, First, Middle Initial) John R. Murphy		Date of Receipt
	Mailing Address 3993 Spring Blvd		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2005"/>
	City	State	Zip Code
	Eugene	OR	97405-4491
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Murphy Company		Occupation President	Transaction ID: 80930.C85409
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
		<input type="text" value="1000.00"/>	Receipt

<b>B.</b>	Full Name (Last, First, Middle Initial) Nelson Olf		Date of Receipt
	Mailing Address 2736 Magnolia Way		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2005"/>
	City	State	Zip Code
	Forest Grove	OR	97116-1251
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Pacific University		Occupation Professor	Transaction ID: 80930.C85300
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="150.00"/>
		<input type="text" value="250.00"/>	Receipt

<b>C.</b>	Full Name (Last, First, Middle Initial) Raymond Ozyjowski		Date of Receipt
	Mailing Address 3555 NE Davis Street		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2005"/>
	City	State	Zip Code
	Portland	OR	97232
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Pacific-Crest Securities		Occupation Institutional Sales	Transaction ID: 80930.C85213
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="40.00"/>
		<input type="text" value="240.00"/>	Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1190.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 12 / 34  
(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)  
R.B. Pamplin

Mailing Address 805 SW Broadway Ste 2400

City State Zip Code  
Portland OR 97204

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

Name of Employer Occupation  
Self Employed Doctor

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 16 / 2005

**Transaction ID:** 80930.C85485

Amount of Each Receipt this Period  
5000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Peter Stott

Mailing Address 2896 SW Patton Road

City State Zip Code  
Portland OR 97204-3701

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

Name of Employer Occupation  
Crown Pacific President & CEO

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2005

**Transaction ID:** 80930.C85462

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
B. Scott Taylor

Mailing Address 8711 NW Terrace View Ct

City State Zip Code  
Portland OR 97229

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

Name of Employer Occupation  
Self Investor

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2005

**Transaction ID:** 80930.C84910

Amount of Each Receipt this Period  
5000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 11000.00

**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 13 / 34
	(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) Ernest W. Williams		Date of Receipt MM / DD / YYYY 09 / 19 / 2005
Mailing Address 12129 SW Anton Dr		<b>Transaction ID:</b> 80930.C84906
City Portland	State OR	Zip Code 97223-3391
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 40.00	

**B.**

Full Name (Last, First, Middle Initial) Ernest W. Williams		Date of Receipt MM / DD / YYYY 09 / 25 / 2005
Mailing Address 12129 SW Anton Dr		<b>Transaction ID:</b> 80930.C85396
City Portland	State OR	Zip Code 97223-3391
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	232.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	20576.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 34
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A.</b>	Full Name (Last, First, Middle Initial) Close Friends PAC# 002725		Date of Receipt
	Mailing Address 5220 NW Winn Dr		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2005"/>
	City	State	Zip Code
	Albany	OR	97321
	FEC ID number of contributing federal political committee.		Transaction ID: 80930.C85253
	<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		Occupation	
		Pac# 002725	
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="100.00"/>	
<input type="checkbox"/> Other (specify) ▼			
			Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="100.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="100.00"/>

# 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 15 / 34

<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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Eugene Country Club</p> <p>Mailing Address 255 Country Club Rd</p> <p>City Eugene State OR Zip Code 97401-2293</p> <p>Purpose of Disbursement Facility Rental OGOP</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80930.E11810 <b>Date of Disbursement</b> 09 / 22 / 2005</p> <p>Amount of Each Disbursement this Period 411.53</p> <p>FACILITY RENTAL OGOP</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) F. Douglas Day</p> <p>Mailing Address 4386 Rowan Ave N</p> <p>City Keizer State OR Zip Code 97303-5824</p> <p>Purpose of Disbursement Facility Rental OGOP</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80930.E11800 <b>Date of Disbursement</b> 09 / 19 / 2005</p> <p>Amount of Each Disbursement this Period 350.00</p> <p>FACILITY RENTAL OGOP</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc</p> <p>Mailing Address 12450 Automobile Boulevard</p> <p>City Clearwater State FL Zip Code 34622-</p> <p>Purpose of Disbursement List Management Service OGOP</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80930.E11806 <b>Date of Disbursement</b> 09 / 22 / 2005</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>LIST MANAGEMENT SERVICE OGOP</p>

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

5761.53

**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 16 / 34

<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)  
Eagle Crest Resort

Mailing Address PO Box 1215

City Redmond State OR Zip Code 97756-

Purpose of Disbursement  
Facility Rental OGOP

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 80930.E11809  
Date of Disbursement

09 / 22 / 2005

Amount of Each Disbursement this Period

378.43

FACILITY RENTAL OGOP

B.

Full Name (Last, First, Middle Initial)  
Entertainment Communications Network

Mailing Address 4370 Tujunga Ave Suite 210

City Studio City State CA Zip Code 91604-

Purpose of Disbursement  
List Management Service OGOP

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 80930.E11818  
Date of Disbursement

09 / 30 / 2005

Amount of Each Disbursement this Period

1131.35

LIST MANAGEMENT SERVICE  
OGOP

C.

Full Name (Last, First, Middle Initial)  
Leyla Estes

Mailing Address PO Box 3565

City Bend State OR Zip Code 97707-0565

Purpose of Disbursement  
Office Supplies OGOP

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 80930.E11815  
Date of Disbursement

09 / 28 / 2005

Amount of Each Disbursement this Period

157.48

OFFICE SUPPLIES OGOP

SUBTOTAL of Disbursements This Page (optional) ▶

1667.26

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 17 / 34

<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Leyla Estes</p> <p>Mailing Address PO Box 3565</p> <p>City Bend State OR Zip Code 97707-0565</p> <p>Purpose of Disbursement Office Supplies OGOP</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80930.E11816 <b>Date of Disbursement</b> 09 / 29 / 2005</p> <p>Amount of Each Disbursement this Period 48.00</p> <p>OFFICE SUPPLIES OGOP</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) FLS Connect</p> <p>Mailing Address 7320 N Dreamy Draw Dr</p> <p>City Phoenix State AZ Zip Code 85020-5212</p> <p>Purpose of Disbursement Message Phone Calls OGOP</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80930.E11821 <b>Date of Disbursement</b> 09 / 30 / 2005</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>MESSAGE PHONE CALLS OGOP</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) June Hartley</p> <p>Mailing Address PO Box 2643 3149 Shay Way</p> <p>City Nyssa State OR Zip Code 97913-0643</p> <p>Purpose of Disbursement Travel OGOP</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80930.E11813 <b>Date of Disbursement</b> 09 / 22 / 2005</p> <p>Amount of Each Disbursement this Period 1040.76</p> <p>TRAVEL OGOP</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6088.76</b>
<b>TOTAL</b> 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 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) June Hartley	Transaction ID: 80930.E11822 Date of Disbursement 09 / 30 / 2005
	Mailing Address PO Box 2643 3149 Shay Way	Amount of Each Disbursement this Period 39.96
	City Nyssa State OR Zip Code 97913-0643	
	Purpose of Disbursement Mileage 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) ▼
		MILEAGE

B.	Full Name (Last, First, Middle Initial) Kaseys Texas Style BBQ	Transaction ID: 80930.E11803 Date of Disbursement 09 / 20 / 2005
	Mailing Address 403 SE 3rd St	Amount of Each Disbursement this Period 540.00
	City Bend State OR Zip Code 97702-1663	
	Purpose of Disbursement Food/Beverage OGOP 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) ▼
		FOOD/BEVERAGE OGOP

C.	Full Name (Last, First, Middle Initial) Amy Langdon	Transaction ID: 80930.E11789 Date of Disbursement 09 / 29 / 2005
	Mailing Address 2830 Foxhaven Dr SE	Amount of Each Disbursement this Period 233.84
	City Salem State OR Zip Code 97306-2526	
	Purpose of Disbursement Phone Expense/Travel OGOP 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) ▼
		PHONE EXPENSE/TRAVEL OGOP

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>813.80</b>
<b>TOTAL</b> 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 19 / 34

<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) U.S. Postmaster	Transaction ID: 80930.E11804 Date of Disbursement
	Mailing Address 410 Mill St SE	<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2005"/>
	City Salem State OR Zip Code 97301-	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage OGOP	<input type="text" value="150.00"/>
	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) ▼
		POSTAGE OGOP

B.	Full Name (Last, First, Middle Initial) U.S. Postmaster	Transaction ID: 80930.E11805 Date of Disbursement
	Mailing Address 410 Mill St SE	<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2005"/>
	City Salem State OR Zip Code 97301-	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage OGOP	<input type="text" value="500.00"/>
	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) ▼
		POSTAGE OGOP

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="650.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="14981.35"/>

# 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

<p><b>A.</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><b>Transaction ID:</b> 80930.E11784 <b>Date of Disbursement</b> 09 / 02 / 2005</p> <p>Amount of Each Disbursement this Period 1242.86</p> <p>FEA PAYROLL TAXES</p>
<p><b>B.</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</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81017.E15278 <b>Date of Disbursement</b> 09 / 30 / 2005</p> <p>Amount of Each Disbursement this Period 1242.88</p> <p>FEA PAYROLL</p>
<p><b>C.</b> 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><b>Transaction ID:</b> 80930.E11787 <b>Date of Disbursement</b> 09 / 01 / 2005</p> <p>Amount of Each Disbursement this Period 2069.96</p> <p>FEA PAYROLL</p>

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

4555.70

**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: 80930.E11788 Date of Disbursement 09 / 15 / 2005
	Mailing Address 2830 Foxhaven Dr SE	
	City Salem State OR Zip Code 97306-2526	Amount of Each Disbursement this Period 2069.95
	Purpose of Disbursement FEA payroll	Category/ Type FEA PAYROLL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Oregon Department of Revenue	Transaction ID: 80930.E14441 Date of Disbursement 09 / 02 / 2005
	Mailing Address P.O. Box 14800	
	City Salem State OR Zip Code 97309-0920	Amount of Each Disbursement this Period 269.00
	Purpose of Disbursement FEA payroll taxes	Category/ Type 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) ▼

C.	Full Name (Last, First, Middle Initial) Oregon Department of Revenue	Transaction ID: 81017.E15281 Date of Disbursement 09 / 30 / 2005
	Mailing Address P.O. Box 14800	
	City Salem State OR Zip Code 97309-0920	Amount of Each Disbursement this Period 269.00
	Purpose of Disbursement FEA Payroll Taxes	Category/ Type 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) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 2607.95

**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 22 / 34

<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><b>A.</b> Full Name (Last, First, Middle Initial) Cindy Taylor</p> <p>Mailing Address 595 Rockwood St SE</p> <p>City Salem State OR Zip Code 97306-1756</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</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80930.E11790</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="05"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="945.51"/></p> <p>FEA PAYROLL</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Cindy Taylor</p> <p>Mailing Address 595 Rockwood St SE</p> <p>City Salem State OR Zip Code 97306-1756</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</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80930.E11791</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="05"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="945.51"/></p> <p>FEA PAYROLL</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Cindy Taylor</p> <p>Mailing Address 595 Rockwood St SE</p> <p>City Salem State OR Zip Code 97306-1756</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</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 80930.E11826</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="05"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="945.52"/></p> <p>FEA PAYROLL</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2836.54"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="10000.19"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

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

Outstanding Balance Beginning This Period <input type="text" value="3900.00"/>		<b>Transaction ID:</b> LS80930.E11819	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1950.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1950.00"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="27811.30"/>		<b>Transaction ID:</b> LS80930.E11821	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="5000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="22811.30"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="7564.49"/>		<b>Transaction ID:</b> LS80930.E11806	
Amount Incurred This Period <input type="text" value="3735.58"/>	Payment This Period <input type="text" value="5000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6300.07"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="31061.37"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Computer Village			Nature of Debt (Purpose): Computer Support
Mailing Address 4075 76th Ave NE			
City Salem	State OR	ZIP Code 97305-	

Outstanding Balance Beginning This Period <input type="text" value="389.25"/>		<b>Transaction ID:</b> LS80930.E11807	
Amount Incurred This Period <input type="text" value="5.00"/>	Payment This Period <input type="text" value="394.25"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="1000.00"/>		<b>Transaction ID:</b> LS81116.E15755	
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="1000.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> 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="0.00"/>		<b>Transaction ID:</b> LS81017.E15285	
Amount Incurred This Period <input type="text" value="316.44"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="316.44"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="1316.44"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

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

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID:</b> LS81018.E15302	
Amount Incurred This Period <input type="text" value="304.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="304.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Kevin Hoar			Nature of Debt (Purpose): Office Supplies
Mailing Address 12563 NW Millford St			
City Portland	State OR	ZIP Code 97229-9303	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID:</b> LS81018.E15301	
Amount Incurred This Period <input type="text" value="680.41"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="680.41"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="1131.35"/>		<b>Transaction ID:</b> LS80930.E11818	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1131.35"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="984.41"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 26 / 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

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

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

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

Outstanding Balance Beginning This Period <input type="text" value="1051.90"/>	<b>Transaction ID:</b> LS80930.E11820	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="864.00"/>	Outstanding Balance at Close of This Period <input type="text" value="187.90"/>

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Eagle Crest Resort	Nature of Debt (Purpose): Facility Rental OGOP
Mailing Address PO Box 1215	
City State ZIP Code Redmond OR 97756-	

Outstanding Balance Beginning This Period <input type="text" value="378.43"/>	<b>Transaction ID:</b> LS80930.E11809	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="378.43"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="67368.80"/>
2) <b>TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

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

Outstanding Balance Beginning This Period 667.77		<b>Transaction ID:</b> LS81018.E15295	
Amount Incurred This Period 629.26	Payment This Period 0.00	Outstanding Balance at Close of This Period 1297.03	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Eugene Country Club			Nature of Debt (Purpose): Facility Rental OGOP
Mailing Address 255 Country Club Rd			
City Eugene	State OR	ZIP Code 97401-2293	

Outstanding Balance Beginning This Period 411.53		<b>Transaction ID:</b> LS80930.E11810	
Amount Incurred This Period 0.00	Payment This Period 411.53	Outstanding Balance at Close of This Period 0.00	

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

Outstanding Balance Beginning This Period 1071.42		<b>Transaction ID:</b> LS81116.E15759	
Amount Incurred This Period 54.46	Payment This Period 0.00	Outstanding Balance at Close of This Period 1125.88	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	2422.91
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 28 / 34	
	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 Huckaby Davis Lisker			Nature of Debt (Purpose): Compliance Consulting
Mailing Address 228 S Washington St Ste 115			
City Alexandria	State VA	ZIP Code 22314-5404	

Outstanding Balance Beginning This Period		<b>Transaction ID: LS81018.E15300</b>	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
757.48	0.00	757.48	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	757.48
2) <b>TOTALS</b> This Period (last page this line number only).....	103911.41
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	103911.41

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

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Key Bank**			<b>Type of Allocated Activity:</b> <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 <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">101852.24</div>	
City Salem	State OR	Zip Code 97304-		
Purpose of Disbursement: Bank Fee			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 09 / 2005	
Activity or Event Identifier: ADMINISTRATION B 4111			<b>Transaction ID:</b> H480930.E11785	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.50		25.50		30.00

<b>B. Full Name (Last, First, Middle Initial)</b> Stafford Studios			<b>Type of Allocated Activity:</b> <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 <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">95604.36</div>	
City Clackamas	State OR	Zip Code 97015-		
Purpose of Disbursement: Web Service			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 02 / 2005	
Activity or Event Identifier: ADMINISTRATION B 4111			<b>Transaction ID:</b> H480930.E11793	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.00		255.00		300.00

<b>C. Full Name (Last, First, Middle Initial)</b> LifeWise			<b>Type of Allocated Activity:</b> <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 <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">96122.24</div>	
City Bend	State OR	Zip Code 97702-		
Purpose of Disbursement: Insurance			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 07 / 2005	
Activity or Event Identifier: ADMINISTRATION B 4111			<b>Transaction ID:</b> H480930.E11794	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.92		243.18		286.10

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
92.42		523.68		616.10

**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)**  
Certified Property

Mailing Address  
PO Box 269

City Salem	State OR	Zip Code 97308-0269	Category/ Type
Purpose of Disbursement: Rent			

Activity or Event Identifier:  
ADMINISTRATION B 4111

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  
101822.24

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	8	/	2	0	0	5

  
**Transaction ID:** H480930.E11795

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
855.00		4845.00		5700.00

**B. Full Name (Last, First, Middle Initial)**  
Michelle Ashenfelter

Mailing Address  
2012 NE 15th

City Portland	State OR	Zip Code 97212-	Category/ Type
Purpose of Disbursement: Mileage			

Activity or Event Identifier:  
ADMINISTRATION B 4111

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  
102029.54

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	5

  
**Transaction ID:** H480930.E11796

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.60		150.70		177.30

**C. Full Name (Last, First, Middle Initial)**  
Comcast

Mailing Address  
PO Box 173885

City Denver	State CO	Zip Code 80217-	Category/ Type
Purpose of Disbursement: Utilities			

Activity or Event Identifier:  
ADMINISTRATION B 4111

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  
102247.55

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	6	/	2	0	0	5

  
**Transaction ID:** H480930.E11797

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.47		172.66		203.13

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
912.07		5168.36		6080.43

**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)**  
Office Depot\*\*

Mailing Address  
2945 Liberty St S

City State Zip Code  
Salem OR 97306-

Purpose of Disbursement:  
Office Supplies

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

102617.96

Activity or Event Identifier:  
ADMINISTRATION B 4111

Date  /  /

Transaction ID: H480930.E11798

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.56		314.85		370.41

**B. Full Name (Last, First, Middle Initial)**  
Ricoh Customer Finance Corp.

Mailing Address  
PO Box 310010273

City State Zip Code  
Pasadena CA 91110-0001

Purpose of Disbursement:  
Equipment Lease

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

103198.66

Activity or Event Identifier:  
ADMINISTRATION B 4111

Date  /  /

Transaction ID: H480930.E11799

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.70		270.30		318.00

**C. Full Name (Last, First, Middle Initial)**  
Pitney Bowes Credit Corp

Mailing Address  
P. O. Box 85460

City State Zip Code  
Louisville KY 40285-5460

Purpose of Disbursement:  
Equipment Lease

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

102880.66

Activity or Event Identifier:  
ADMINISTRATION B 4111

Date  /  /

Transaction ID: H480930.E11801

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.41		223.29		262.70

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
142.67		808.44		951.11

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial)</b> Pitney Bowes Credit Corp			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 P. O. Box 85460			Allocated Activity or Event Year-To-Date 103935.61	
City Louisville	State KY	Zip Code 40285-5460	Date <input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2005"/>	
Purpose of Disbursement: Equipment Lease			Category/ Type	
Activity or Event Identifier: ADMINISTRATION B 4111			Transaction ID: H480930.E11802	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.41		223.29		262.70

<b>B. Full Name (Last, First, Middle Initial)</b> 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 103592.91	
City Salem	State OR	Zip Code 97305-	Date <input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2005"/>	
Purpose of Disbursement: Computer Support			Category/ Type	
Activity or Event Identifier: ADMINISTRATION B 4111			Transaction ID: H480930.E11807	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.14		335.11		394.25

<b>C. Full Name (Last, First, Middle Initial)</b> COSSA COSSA			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 P.O. Box 1606			Allocated Activity or Event Year-To-Date 103672.91	
City Bend	State OR	Zip Code 97702-	Date <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2005"/>	
Purpose of Disbursement: Facility Rental OGOP			Category/ Type	
Activity or Event Identifier: ADMINISTRATION B 4111			Transaction ID: H480930.E11814	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.00		68.00		80.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
110.55		626.40		736.95

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**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)**  
Aristotle

Mailing Address  
205 Pennsylvania Ave SE

City State Zip Code  
Washington DC 20003-

Purpose of Disbursement:  
Computer Support

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

105885.61

Activity or Event Identifier:  
ADMINISTRATION B 4111

Date 09 / 30 / 2005

Transaction ID: H480930.E11819

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
292.50		1657.50		1950.00

**B. Full Name (Last, First, Middle Initial)**  
Connolly & Goldian

Mailing Address  
PO Box 3095

City State Zip Code  
Salem OR 97302-

Purpose of Disbursement:  
Legal 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

106750.61

Activity or Event Identifier:  
ADMINISTRATION B 4111

Date 09 / 30 / 2005

Transaction ID: H480930.E11820

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
129.60		734.40		864.00

**C. Full Name (Last, First, Middle Initial)**  
Key Bank\*\*

Mailing Address  
1500 Edgewater St NW

City State Zip Code  
Salem OR 97304-

Purpose of Disbursement:  
Bank Fee

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

105886.61

Activity or Event Identifier:  
ADMINISTRATION B 4111

Date 09 / 30 / 2005

Transaction ID: H481017.E15279

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
422.25		2392.75		2815.00

**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

**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

Mailing Address  
c/o Key Bank 1500 Edgewater St NW

City State Zip Code  
Salem OR 97304-

Purpose of Disbursement:  
Credit Card Fee

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

102044.42

Activity or Event Identifier:  
ADMINISTRATION B 4111

Date  /  /

Transaction ID: H481017.E15282

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.23		12.65		14.88

**B. Full Name (Last, First, Middle Initial)**  
Authnet Gateway Billing

Mailing Address  
293 Boston Post Rd W Ste 220

City State Zip Code  
Marlborough MA 01752-

Purpose of Disbursement:  
Credit Card Fee

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

95836.14

Activity or Event Identifier:  
ADMINISTRATION B 4111

Date  /  /

Transaction ID: H481017.E15283

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.50		8.50		10.00

**C. Full Name (Last, First, Middle Initial)**  
Discover Corporate Card

Mailing Address  
PO Box 30423

City State Zip Code  
Salt Lake City UT 84130-0423

Purpose of Disbursement:  
Credit Card Fee

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

95826.14

Activity or Event Identifier:  
ADMINISTRATION B 4111

Date  /  /

Transaction ID: H481017.E15284

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.27		188.51		221.78

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.00		209.66		246.66

**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
1716.96	9729.29	11446.25