



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Oregon Right To Life Victory PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		190383.32
(b) Cash on Hand at Beginning of Reporting Period.....	191611.99	
(c) Total Receipts (from Line 19) .....	5755.00	84900.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	197366.99	275283.32
7. Total Disbursements (from Line 31).....	197653.85	275570.18
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	- 286.86	- 286.86
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) .....	0.00	

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 Right To Life Victory PAC**

Report Covering the Period: From:  /  /  To:  /  /

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		
(i) Itemized (use Schedule A).....	5755.00	84800.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5755.00	84800.00
(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) .....	5755.00	84800.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	100.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	5755.00	84900.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5755.00	84900.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	14232.41	14232.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	14232.41	14232.41
22. Transfers to Affiliated/Other Party Committees.....	0.00	50.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	183346.44	223446.18
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 .....	75.00	325.00
(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)).....	75.00	325.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	37516.59
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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 .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	197653.85	275570.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	197653.85	275570.18

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	5755.00	84800.00
34. Total Contribution Refunds (from Line 28(d)) .....	75.00	325.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5680.00	84475.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	14232.41	14232.41
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	14232.41	14232.41

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA

Transaction ID :

This filing is an amendment to the July 15, 2020 Quarterly report originally filed on 7/15/20.

Form/Schedule:

Transaction ID:

**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 7 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 Right To Life Victory PAC**

**A. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
78430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 02 / 2020

**Transaction ID : SA11AI.5644**

Amount of Each Receipt this Period  
135.00

Memo Item

**B. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
78550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 04 / 2020

**Transaction ID : SA11AI.5648**

Amount of Each Receipt this Period  
120.00

Memo Item

**C. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
78705.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 05 / 2020

**Transaction ID : SA11AI.5650**

Amount of Each Receipt this Period  
155.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	410.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Oregon Right To Life Victory PAC**

**A. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
78870.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 07 / 2020

**Transaction ID : SA11AI.5651**

Amount of Each Receipt this Period  
165.00

Memo Item

**B. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
79020.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2020

**Transaction ID : SA11AI.5654**

Amount of Each Receipt this Period  
150.00

Memo Item

**C. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
79070.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 11 / 2020

**Transaction ID : SA11AI.5655**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	365.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Oregon Right To Life Victory PAC**

**A. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
79145.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2020

**Transaction ID : SA11AI.5656**

Amount of Each Receipt this Period  
75.00

Memo Item

**B. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
79320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 19 / 2020

**Transaction ID : SA11AI.5657**

Amount of Each Receipt this Period  
175.00

Memo Item

**C. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
79470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 21 / 2020

**Transaction ID : SA11AI.5658**

Amount of Each Receipt this Period  
150.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Oregon Right To Life Victory PAC**

**A. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
79570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 22 / 2020

**Transaction ID : SA11AI.5659**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
79670.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 25 / 2020

**Transaction ID : SA11AI.5660**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
79745.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 29 / 2020

**Transaction ID : SA11AI.5661**

Amount of Each Receipt this Period  
75.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	275.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 38
<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 Right To Life Victory PAC**

**A. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
79795.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2020

**Transaction ID : SA11AI.5662**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
79845.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2020

**Transaction ID : SA11AI.5663**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
80045.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	03	/	2020

**Transaction ID : SA11AI.5664**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Oregon Right To Life Victory PAC**

**A. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
80145.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 04 / 2020

**Transaction ID : SA11AI.5665**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
80200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 05 / 2020

**Transaction ID : SA11AI.5666**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
80225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 06 / 2020

**Transaction ID : SA11AI.5667**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	255.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Oregon Right To Life Victory PAC**

**A. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
80325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 08 / 2020

**Transaction ID : SA11AI.5668**

Amount of Each Receipt this Period  
 100.00

Memo Item

**B. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
80375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2020

**Transaction ID : SA11AI.5669**

Amount of Each Receipt this Period  
 50.00

Memo Item

**C. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
80475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 11 / 2020

**Transaction ID : SA11AI.5670**

Amount of Each Receipt this Period  
 100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 38
<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

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 Right To Life Victory PAC**

**A. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
80575.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	13	/	2020

**Transaction ID : SA11AI.5671**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
80725.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2020

**Transaction ID : SA11AI.5672**

Amount of Each Receipt this Period  
150.00

Memo Item

**C. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
80825.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2020

**Transaction ID : SA11AI.5673**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 15 OF 38  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Oregon Right To Life Victory PAC**

**A. Contributions, Unitemized, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4335 River Road N  
 City Keizer State OR Zip Code 97303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Oregon Right to Life Occupation (for Individual) PAC Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 81125.00

Date of Receipt 05 / 21 / 2020  
**Transaction ID : SA11AI.5674**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. Contributions, Unitemized, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4335 River Road N  
 City Keizer State OR Zip Code 97303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Oregon Right to Life Occupation (for Individual) PAC Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 81175.00

Date of Receipt 05 / 22 / 2020  
**Transaction ID : SA11AI.5676**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Contributions, Unitemized, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4335 River Road N  
 City Keizer State OR Zip Code 97303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Oregon Right to Life Occupation (for Individual) PAC Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 81225.00

Date of Receipt 05 / 25 / 2020  
**Transaction ID : SA11AI.5677**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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 16 OF 38
	<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 Right To Life Victory PAC**

**A. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
81325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 30 / 2020  
**Transaction ID : SA11AI.5679**

Amount of Each Receipt this Period  
 100.00

Memo Item

**B. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
81425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2020  
**Transaction ID : SA11AI.5680**

Amount of Each Receipt this Period  
 100.00

Memo Item

**C. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
81575.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2020  
**Transaction ID : SA11AI.5681**

Amount of Each Receipt this Period  
 150.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Oregon Right To Life Victory PAC**

**A. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
81595.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 02 / 2020

**Transaction ID : SA11AI.5682**

Amount of Each Receipt this Period  
20.00

Memo Item

**B. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
81650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2020

**Transaction ID : SA11AI.5684**

Amount of Each Receipt this Period  
55.00

Memo Item

**C. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
81675.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 06 / 2020

**Transaction ID : SA11AI.5685**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 38
<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 Right To Life Victory PAC**

**A. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
81875.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		09		2020

**Transaction ID : SA11AI.5686**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
81975.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2020

**Transaction ID : SA11AI.5687**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
82225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		18		2020

**Transaction ID : SA11AI.5691**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 38
	<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 Right To Life Victory PAC**

**A. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
82275.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2020

**Transaction ID : SA11AI.5692**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. Contributions, Unitemized, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4335 River Road N

City Keizer	State OR	Zip Code 97303
----------------	-------------	-------------------

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

Name of Employer (for Individual) Oregon Right to Life	Occupation (for Individual) PAC Director
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
82475.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2020

**Transaction ID : SA11AI.5693**

Amount of Each Receipt this Period  
200.00

Memo Item

**C. Walker, Marianne, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 65895 Highway 20

City Bend	State OR	Zip Code 97703
--------------	-------------	-------------------

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

Name of Employer (for Individual) Sent Letter, no answer	Occupation (for Individual) Sent Letter, no answer
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	07	/	2020

**Transaction ID : SA11AI.5652**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Oregon Right To Life Victory PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Willis, Aidan, , ,

Mailing Address 1202 NE 110th Street

City Vancouver	State WA	Zip Code 98685
-------------------	-------------	-------------------

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

Name of Employer (for Individual) TEAM Construction	Occupation (for Individual) General Contractor
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2020

**Transaction ID : SA11AI.5882**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	5755.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Right To Life Victory PAC**

**A. American Marketing & Publishing, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 2012 Stonewater Ct

City Hoschton State GA Zip Code 30548

Purpose of Disbursement GOTV mailer

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 24 / 2020

FEC Identification Number: C

Transaction ID : SB21B.5850

Amount of Each Disbursement this Period: 4041.19

Memo Item

**B. CASEY HILL**

Full Name (Last, First, Middle Initial)

Mailing Address 1642 SW 58TH AVE

City PORTLAND State OR Zip Code 97221

Purpose of Disbursement Graphic design

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 21 / 2020

FEC Identification Number: C

Transaction ID : SB21B.5856

Amount of Each Disbursement this Period: 300.00

Memo Item

**C. CASEY HILL**

Full Name (Last, First, Middle Initial)

Mailing Address 1642 SW 58TH AVE

City PORTLAND State OR Zip Code 97221

Purpose of Disbursement Graphic design

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 05 / 2020

FEC Identification Number: C

Transaction ID : SB21B.5858

Amount of Each Disbursement this Period: 150.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4491.19

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Right To Life Victory PAC**

**A. Columbia Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 4260 River Rd N

City Keizer State OR Zip Code 97303

Purpose of Disbursement Credit card fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 02 / 2020

FEC Identification Number: C

Transaction ID : SB21B.5860

Amount of Each Disbursement this Period: 37.65

Memo Item

**B. Columbia Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 4260 River Rd N

City Keizer State OR Zip Code 97303

Purpose of Disbursement Credit card fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2020

FEC Identification Number: C

Transaction ID : SB21B.5862

Amount of Each Disbursement this Period: 77.16

Memo Item

**C. Columbia Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 4260 River Rd N

City Keizer State OR Zip Code 97303

Purpose of Disbursement Credit card fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 04 / 2020

FEC Identification Number: C

Transaction ID : SB21B.5864

Amount of Each Disbursement this Period: 28.48

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 143.29

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 Right To Life Victory PAC**

**A. Columbia Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 4260 River Rd N

City Keizer State OR Zip Code 97303

Purpose of Disbursement Credit card fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 12 / 2020

FEC Identification Number: C

Transaction ID : SB21B.5866

Amount of Each Disbursement this Period: 77.71

Memo Item

**B. Columbia Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 4260 River Rd N

City Keizer State OR Zip Code 97303

Purpose of Disbursement Credit card fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 02 / 2020

FEC Identification Number: C

Transaction ID : SB21B.5868

Amount of Each Disbursement this Period: 43.50

Memo Item

**C. Columbia Bank**

Full Name (Last, First, Middle Initial)

Mailing Address 4260 River Rd N

City Keizer State OR Zip Code 97303

Purpose of Disbursement Credit card fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 11 / 2020

FEC Identification Number: C

Transaction ID : SB21B.5870

Amount of Each Disbursement this Period: 77.74

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 198.95

**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)

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

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

NAME OF COMMITTEE (In Full)

**Oregon Right To Life Victory PAC**

Full Name (Last, First, Middle Initial)

**A. Meeting Street Research, LLC**

Mailing Address 413 Pitt Sreet

City  
Mount Pleasant

State  
SC

Zip Code  
29464

Purpose of Disbursement  
Research

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]  
**Transaction ID : SB21B.5872**  
Amount of Each Disbursement this Period  
[REDACTED] 9000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Oregon Right To Life**

Mailing Address 4335 River Rd North

City  
Salem,

State  
OR

Zip Code  
97303

Purpose of Disbursement  
Bank fees

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	0

FEC Identification Number

C [REDACTED]  
**Transaction ID : SB21B.5878**  
Amount of Each Disbursement this Period  
[REDACTED] 117.26

Memo Item

Full Name (Last, First, Middle Initial)

**C. Oregon Right To Life**

Mailing Address 4335 River Rd North

City  
Salem,

State  
OR

Zip Code  
97303

Purpose of Disbursement  
Postage

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	0

FEC Identification Number

C [REDACTED]  
**Transaction ID : SB21B.5880**  
Amount of Each Disbursement this Period  
[REDACTED] 185.54

Memo Item

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

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

[REDACTED]	9302.80
[REDACTED]	14136.23



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Oregon Right To Life Victory PAC
FEC IDENTIFICATION NUMBER C C00592303

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee American Marketing & Publishing, Inc.
Mailing Address 2012 Stonewater Ct
City Hoschton State GA Zip Code 30548
Purpose of Expenditure Direct mail Category/Type 006
Date of Public Distribution/Dissemination 10/29/2020
Amount 377.76
Transaction ID: SE.5852
Date of Disbursement or Obligation 04/24/2020
Name of Federal Candidate: Buehler, Knute, , , Support Oppose
Office Sought: House District: 02 State: OR
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee American Marketing & Publishing, Inc.
Mailing Address 2012 Stonewater Ct
City Hoschton State GA Zip Code 30548
Purpose of Expenditure Direct mail Category/Type 006
Date of Public Distribution/Dissemination 04/29/2020
Amount 3136.32
Transaction ID: SE.5853
Date of Disbursement or Obligation 04/24/2020
Name of Federal Candidate: Crumpacker, Jimmy, , , Support Oppose
Office Sought: House District: 02 State: OR
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 3514.08
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

ANDERSON, LOIS, ,

[Electronically Filed]

Date 10/19/2020

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Oregon Right To Life Victory PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00592303
--	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>American Marketing &amp; Publishing, Inc.</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 2012 Stonewater Ct		Amount <input type="text"/>	
City Hoschton	State GA	Zip Code 30548	Transaction ID : <b>SE.5713</b>
Purpose of Expenditure Printing and postage		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Buehler, Knute, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OR</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>American Marketing &amp; Publishing, Inc.</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 2012 Stonewater Ct		Amount <input type="text"/>	
City Hoschton	State GA	Zip Code 30548	Transaction ID : <b>SE.5715</b>
Purpose of Expenditure Printing and postage		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Buehler, Knute, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OR</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

ANDERSON, LOIS, , ,

[Electronically Filed]

Date  /  /

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Oregon Right To Life Victory PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00592303
--	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>American Marketing &amp; Publishing, Inc.</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 2012 Stonewater Ct			Amount <input type="text"/>		
City Hoschton	State GA	Zip Code 30548	Transaction ID : <b>SE.5818</b>		
Purpose of Expenditure Direct mail		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Buehler, Knute, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OR</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item <b>American Marketing &amp; Publishing, Inc.</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address 2012 Stonewater Ct			Amount <input type="text"/>		
City Hoschton	State GA	Zip Code 30548	Transaction ID : <b>SE.5825</b>		
Purpose of Expenditure Direct Mail		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: Crumpacker, Jimmy, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OR</u>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
<b>(c) TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

ANDERSON, LOIS, , ,

[Electronically Filed]

Date

/  /

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Oregon Right To Life Victory PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00592303                 </div>
--	---

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>American Marketing &amp; Publishing, Inc.</b>		Date of Public Distribution/Dissemination <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">05 / 09 / 2020</div>	
Mailing Address 2012 Stonewater Ct		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">8861.38</div>	
City Hoschton	State GA		
Purpose of Expenditure Direct Mail		Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>	
Name of Federal Candidate: Buehler, Knute, , ,		Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OR</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">201835.50</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>American Marketing &amp; Publishing, Inc.</b>		Date of Public Distribution/Dissemination <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">05 / 12 / 2020</div>	
Mailing Address 2012 Stonewater Ct		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">12749.30</div>	
City Hoschton	State GA		
Purpose of Expenditure Printing and postage		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: Buehler, Knute, , ,		Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OR</u>	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">214584.80</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">21610.68</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

ANDERSON, LOIS, , ,

*[Electronically Filed]*

Date

M M / D D / Y Y Y Y Y Y  

10 / 19 / 2020

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Oregon Right To Life Victory PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00592303
--	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>American Marketing &amp; Publishing, Inc.</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 2012 Stonewater Ct	Amount <input type="text"/>
City Hoschton State GA Zip Code 30548	Transaction ID : <b>SE.5851</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Direct mail Category/Type 006	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Buehler, Knute, , , Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OR
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 223472.18	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item <b>Intisar Strategies LLC</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 945 Columbia St NE #24	Amount <input type="text"/>
City Salem State OR Zip Code 97301	Transaction ID : <b>SE.5806</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Peer to peer text messages Category/Type 006	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Buehler, Knute, , , Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OR
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 70898.20	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 9865.14
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

ANDERSON, LOIS, , ,

[Electronically Filed]

Date

/  /

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Oregon Right To Life Victory PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00592303                 </div>
--	---

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Intisar Strategies LLC</b>			Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 04 / 10 / 2020		
Mailing Address 945 Columbia St NE #24			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                  913.28             </div>		
City Salem	State OR	Zip Code 97301			
Purpose of Expenditure Peer to peer text messages		Category/Type <span style="border: 1px solid black; padding: 2px;">006</span>	Transaction ID : <b>SE.5811</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 04 / 10 / 2020		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Buehler, Knute, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>02</u> State: <u>OR</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">71811.48</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input checked="" type="checkbox"/> Memo Item <b>Knopp, Reagan, , ,</b>			Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 04 / 04 / 2020		
Mailing Address 4246 Sagecrest Dr. NE			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                  26.00             </div>		
City Albany	State OR	Zip Code 97322			
Purpose of Expenditure Website		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.5699</b> Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 04 / 14 / 2020		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Buehler, Knute, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>02</u> State: <u>OR</u>		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">71837.48</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶		

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                  913.28             </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                  00.00             </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                  913.28             </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

ANDERSON, LOIS, , ,

*[Electronically Filed]*

Date

M M / D D / Y Y Y Y Y Y  
10 / 19 / 2020

Signature

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : SE.5699

Reimbursement for expense to Squarespace

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Oregon Right To Life Victory PAC
FEC IDENTIFICATION NUMBER C C00592303

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Knopp, Reagan, , , Memo Item
Mailing Address 4246 Sagecrest Dr. NE
City Albany State OR Zip Code 97322
Purpose of Expenditure Website Category/Type 004
Date of Public Distribution/Dissemination 05/12/2020
Amount 26.00
Transaction ID : SE.5729
Date of Disbursement or Obligation 05/12/2020
Name of Federal Candidate: Buehler, Knute, , , Support Oppose
Office Sought: House District: 02 State: OR
Disbursement For: Primary General Other (specify)

Full Name of Payee OnMessage, Inc. Memo Item
Mailing Address 705 Melvin Ave #105
City Annapolis State MD Zip Code 21401
Purpose of Expenditure TV production Category/Type
Date of Public Distribution/Dissemination 04/03/2020
Amount 5145.00
Transaction ID : SE.5698
Date of Disbursement or Obligation 04/07/2020
Name of Federal Candidate: Buehler, Knute, , , Support Oppose
Office Sought: House District: 02 State: OR
Disbursement For: Primary General Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 5171.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

ANDERSON, LOIS, , ,
Signature

[Electronically Filed]

Date 10/19/2020



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : SE.5729

Reimbursement for expense to Squarespace

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Oregon Right To Life Victory PAC
FEC IDENTIFICATION NUMBER C C00592303

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee OnMessage, Inc.
Mailing Address 705 Melvin Ave #105
City Annapolis State MD Zip Code 21401
Purpose of Expenditure TV placement
Name of Federal Candidate: Buehler, Knute, ,
Calendar Year-To-Date Per Election for Office Sought 69894.44

Full Name of Payee OnMessage, Inc.
Mailing Address 705 Melvin Ave #105
City Annapolis State MD Zip Code 21401
Purpose of Expenditure Digital ads
Name of Federal Candidate: Buehler, Knute, ,
Calendar Year-To-Date Per Election for Office Sought 96837.48

(a) SUBTOTAL of Itemized Independent Expenditures 49649.70
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

ANDERSON, LOIS, ,

[Electronically Filed]

Date

10 / 19 / 2020

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Oregon Right To Life Victory PAC
FEC IDENTIFICATION NUMBER C C00592303

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee OnMessage, Inc.
Mailing Address 705 Melvin Ave #105
City Annapolis State MD Zip Code 21401
Purpose of Expenditure TV placement
Name of Federal Candidate: Buehler, Knute, , ,
Calendar Year-To-Date Per Election for Office Sought 181531.03

Full Name of Payee Pike, Liberty, , ,
Mailing Address 16052 S. Springwater Rd
City Oregon City State OR Zip Code 97045
Purpose of Expenditure Facebook ads
Name of Federal Candidate: Buehler, Knute, , ,
Calendar Year-To-Date Per Election for Office Sought 96877.38

(a) SUBTOTAL of Itemized Independent Expenditures 14349.23
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

ANDERSON, LOIS, ,

[Electronically Filed]

Date 10 / 19 / 2020

Signature

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SE

Transaction ID : SE.5696

Reimbursement for expense to Facebook

Form/Schedule:

Transaction ID:

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Oregon Right To Life Victory PAC
FEC IDENTIFICATION NUMBER C C00592303

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee The Carlyle Gregory Company LLC
Mailing Address 140 Little Falls St. #104
City Falls Church State VA Zip Code 22046
Purpose of Expenditure Newspaper ads Category/Type 004
Name of Federal Candidate: BUEHLER, KNUTE, , , Support Oppose Office Sought: House District: 02 State: OR
Calendar Year-To-Date Per Election for Office Sought 120258.32
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee The Carlyle Gregory Company LLC
Mailing Address 140 Little Falls St. #104
City Falls Church State VA Zip Code 22046
Purpose of Expenditure Newspaper ads Category/Type 004
Name of Federal Candidate: BUEHLER, KNUTE, , , Support Oppose Office Sought: House District: 02 State: OR
Calendar Year-To-Date Per Election for Office Sought 148964.41
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 5480.75
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 183346.44

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature ANDERSON, LOIS, , , [Electronically Filed] Date 10 / 19 / 2020