

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period: From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	1

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	13278.17									
(c) Total Receipts (from Line 19)	12010.00	312283.22								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	25288.17	355031.93								
7. Total Disbursements (from Line 31)	18041.10	347784.86								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7247.07	7247.07								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	108206.36									

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

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period: From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	1

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	7350.00	89145.50
(i) Itemized (use Schedule A)	4660.00	171875.93
(ii) Unitemized	12010.00	261021.43
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	100.00
(c) Other Political Committees (such as PACs)	12010.00	261121.43
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
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))	12010.00	312283.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	12010.00	278582.59

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.....	1306.11	18764.18
(ii) Non-Federal Share.....	7401.28	105191.34
(b) Other Federal Operating Expenditures.....	0.00	73870.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	8707.39	197826.30
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	9333.71	134958.56
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	9333.71	134958.56
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	18041.10	347784.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10639.82	242593.52

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)	12010.00	261121.43
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12010.00	261121.43
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1306.11	92634.96
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1306.11	92634.96

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..... <small>(Use Schedule L-A)</small>	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..... <small>(Add Lines 1c and 2)</small>	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT <small>(Use Schedule L-B)</small>		
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	139.00
6. TOTAL DISBURSEMENTS..... <small>(Add Lines 4e and 5)</small>	10.75	139.00
7. BEGINNING CASH ON HAND..... <small>(for Column B, use cash as of January 1st)</small>	881.75	1010.00
8. RECEIPTS..... <small>(from Line 3)</small>	0.00	0.00
9. SUBTOTAL..... <small>(Add Lines 7 and 8)</small>	881.75	1010.00
10. DISBURSEMENTS..... <small>(From Line 6)</small>	10.75	139.00
11. ENDING CASH ON HAND..... <small>(Subtract Line 10 From Line 9)</small>	871.00	871.00

**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 / 22
	<input type="checkbox"/> 4a	<input type="checkbox"/> 4c	<input checked="" type="checkbox"/> 5
	<input type="checkbox"/> 4b	<input type="checkbox"/> 4d	

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) / Full Organization Name Key Bank**			Transaction ID: 4B81027.E15481																					
	Mailing Address 1500 Edgewater St NW			Date of Disbursement																					
	City State Zip Code Salem OR 97304			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	0	5
	M	M	/	D	D	/	Y	Y	Y	Y															
1	1		3	0		2	0	0	5																
Purpose of Disbursement Bank Fee			Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="8"></td> <td>10.75</td> </tr> </table>										10.75												
								10.75																	
			Account: 8																						

SUBTOTAL of Disbursements This Page (optional)	▶	10.75
TOTAL 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 / 22
(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)
Robert Holmes

Mailing Address 1210 Spyglass Dr.

City Eugene State OR Zip Code 97401-2057

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 ▼ 750.00

Date of Receipt 11 / 04 / 2005
Transaction ID: 80930.C85877
Amount of Each Receipt this Period 750.00
Receipt

B. Full Name (Last, First, Middle Initial)
Craig Schelske

Mailing Address 105 Westwood Pl., #400

City Brentwood State TN Zip Code 37027-1015

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 ▼ 500.00

Date of Receipt 11 / 23 / 2005
Transaction ID: 80930.C85973
Amount of Each Receipt this Period 500.00
Receipt

C. Full Name (Last, First, Middle Initial)
Dennis Tooley

Mailing Address 2440 NW Williams Loop

City Redmond State OR Zip Code 97756-9198

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 ▼ 286.00

Date of Receipt 11 / 08 / 2005
Transaction ID: 80930.C85989
Amount of Each Receipt this Period 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 1350.00

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 9 / 22	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Donna Woolley		Date of Receipt
	Mailing Address PO Box 43		<input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2005"/>
	City	State	Zip Code
	Drain	OR	97435-0043
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer Eagles View Management		Occupation CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="11000.00"/>	Transaction ID: 80930.C96917
			Amount of Each Receipt this Period <input type="text" value="6000.00"/>
			Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="7350.00"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Key Bank**	Transaction ID: 80930.E11850 Date of Disbursement 11 / 01 / 2005
	Mailing Address 1500 Edgewater St NW	Amount of Each Disbursement this Period 1272.58
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement FEA Payroll taxes Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL TAXES

B.	Full Name (Last, First, Middle Initial) Key Bank**	Transaction ID: 80930.E11851 Date of Disbursement 11 / 15 / 2005
	Mailing Address 1500 Edgewater St NW	Amount of Each Disbursement this Period 1242.88
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement FEA Payroll taxes Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL TAXES

C.	Full Name (Last, First, Middle Initial) Amy Langdon	Transaction ID: 80930.E11846 Date of Disbursement 11 / 01 / 2005
	Mailing Address 2830 Foxhaven Dr SE	Amount of Each Disbursement this Period 2069.95
	City Salem State OR Zip Code 97306-2526	
	Purpose of Disbursement FEA Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)	4585.41
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 11 / 22

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

<p>A. Full Name (Last, First, Middle Initial) Amy Langdon</p> <p>Mailing Address 2830 Foxhaven Dr SE</p> <p>City Salem State OR Zip Code 97306-2526</p> <p>Purpose of Disbursement FEA Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80930.E11847 Date of Disbursement 11 / 15 / 2005</p> <p>Amount of Each Disbursement this Period 2069.94</p> <p>FEA PAYROLL</p>
<p>B. Full Name (Last, First, Middle Initial) Oregon Department of Revenue</p> <p>Mailing Address P.O. Box 14800</p> <p>City Salem State OR Zip Code 97309-0920</p> <p>Purpose of Disbursement FEA Payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80930.E14451 Date of Disbursement 11 / 01 / 2005</p> <p>Amount of Each Disbursement this Period 269.00</p> <p>FEA PAYROLL TAXES</p>
<p>C. Full Name (Last, First, Middle Initial) Oregon Department of Revenue</p> <p>Mailing Address P.O. Box 14800</p> <p>City Salem State OR Zip Code 97309-0920</p> <p>Purpose of Disbursement FEA payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80930.E14452 Date of Disbursement 11 / 15 / 2005</p> <p>Amount of Each Disbursement this Period 269.00</p> <p>FEA PAYROLL TAXES</p>

SUBTOTAL of Disbursements This Page (optional) ►

2607.94

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) Cindy Taylor	Transaction ID: 80930.E11848 Date of Disbursement 11 / 01 / 2005
	Mailing Address 595 Rockwood St SE	
	City Salem State OR Zip Code 97306-1756	Amount of Each Disbursement this Period 945.51
	Purpose of Disbursement FEA Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

B.	Full Name (Last, First, Middle Initial) Cindy Taylor	Transaction ID: 80930.E11849 Date of Disbursement 11 / 15 / 2005
	Mailing Address 595 Rockwood St SE	
	City Salem State OR Zip Code 97306-1756	Amount of Each Disbursement this Period 945.51
	Purpose of Disbursement FEA Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)	▶	1891.02
TOTAL This Period (last page this line number only)	▶	9084.37

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

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

Outstanding Balance Beginning This Period <input type="text" value="1950.00"/>		Transaction ID: LS80930.E9875	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1950.00"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="22811.30"/>		Transaction ID: LS80930.E9436	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="22811.30"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="6300.07"/>		Transaction ID: LS80930.E11349	
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="6300.07"/>	

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

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

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: LS81116.E15762	
Amount Incurred This Period <input type="text" value="1000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1000.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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="2500.00"/>		Transaction ID: 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="2500.00"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="632.88"/>		Transaction ID: LS81017.E15287	
Amount Incurred This Period <input type="text" value="321.38"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="954.26"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="4454.26"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

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

Outstanding Balance Beginning This Period <input type="text" value="297.20"/>		Transaction ID: LS80930.E11854	
Amount Incurred This Period <input type="text" value="297.20"/>	Payment This Period <input type="text" value="594.40"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="304.00"/>		Transaction ID: LS81018.E15302	
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="304.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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="680.41"/>		Transaction ID: LS81018.E15301	
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="680.41"/>	

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

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

Outstanding Balance Beginning This Period <input type="text" value="67180.90"/>		Transaction ID: 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. Full Name (Last, First, Middle Initial) of Debtor or Creditor Connolly & Goldian			Nature of Debt (Purpose): added for audit - pregen report
Mailing Address PO Box 3095			
City Salem	State OR	ZIP Code 97302-	

Outstanding Balance Beginning This Period <input type="text" value="187.90"/>		Transaction ID: LS80930.E11453	
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="187.90"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="1313.21"/>		Transaction ID: LS81018.E15297	
Amount Incurred This Period <input type="text" value="626.46"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1939.67"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="69308.47"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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 <input type="text" value="400.00"/>		Transaction ID: LS81022.E15408	
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="400.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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 <input type="text" value="1201.79"/>		Transaction ID: LS81116.E15763	
Amount Incurred This Period <input type="text" value="38.58"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1240.37"/>	

C. 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 <input type="text" value="757.48"/>		Transaction ID: LS81018.E15300	
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="757.48"/>	

1) SUBTOTALS This Period This Page (optional).....	▶	<input type="text" value="2397.85"/>
2) TOTALS This Period (last page this line number only).....	▶	<input type="text" value="108206.36"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	<input type="text" value="108206.36"/>

**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) LifeWise			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 815 SW Bond St			Allocated Activity or Event Year-To-Date 115797.70		
City Bend	State OR	Zip Code 97702-	Date <input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Insurance			Transaction ID: H480930.E11854		
Activity or Event Identifier: ADMINISTRATION B 4111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
89.16		505.24		594.40

B. Full Name (Last, First, Middle Initial) Stafford Studios			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11594 SE Meadowgold Place			Allocated Activity or Event Year-To-Date 122864.44		
City Clackamas	State OR	Zip Code 97015-	Date <input type="text" value="11"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Web Service			Transaction ID: H480930.E11855		
Activity or Event Identifier: ADMINISTRATION B 4111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
45.00		255.00		300.00

C. Full Name (Last, First, Middle Initial) 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 114697.71		
City Louisville	State KY	Zip Code 40285-5460	Date <input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Equipment Lease			Transaction ID: H480930.E11856		
Activity or Event Identifier: ADMINISTRATION B 4111					

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
173.57		983.53		1157.10

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) 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 115203.30		
City Louisville	State KY	Zip Code 40285-5460	Date M M / D D / Y Y Y Y 11 / 08 / 2005		
Purpose of Disbursement: Equipment Lease			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 4111			Transaction ID: H480930.E11857		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.41		223.29		262.70

B. Full Name (Last, First, Middle Initial) 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 122286.48		
City Louisville	State KY	Zip Code 40285-5460	Date M M / D D / Y Y Y Y 11 / 15 / 2005		
Purpose of Disbursement: Equipment Lease			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 4111			Transaction ID: H480930.E11858		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.89		299.69		352.58

C. Full Name (Last, First, Middle Initial) 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 122564.44		
City Louisville	State KY	Zip Code 40285-5460	Date M M / D D / Y Y Y Y 11 / 22 / 2005		
Purpose of Disbursement: Equipment Lease			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 4111			Transaction ID: H480930.E11859		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.69		236.27		277.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
133.99		759.25		893.24

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) 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 123142.40																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>2</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: H480930.E11860			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	9	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
1	1	/	2	9	/	2	0	0	5																
Louisville	KY	40285-5460																							
Purpose of Disbursement: Equipment Lease			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 4111																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.69		236.27		277.96

B. Full Name (Last, First, Middle Initial) Certified Property			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 269			Allocated Activity or Event Year-To-Date 121883.90																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: H480930.E11902			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	1	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
1	1	/	1	1	/	2	0	0	5																
Salem	OR	97308-0269																							
Purpose of Disbursement: Rent			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 4111																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
911.43		5164.77		6076.20

C. Full Name (Last, First, Middle Initial) Discover Corporate Card			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 30423			Allocated Activity or Event Year-To-Date 114705.78																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: H481027.E15476			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
1	1	/	0	2	/	2	0	0	5																
Salt Lake City	UT	84130-0423																							
Purpose of Disbursement: Credit Card Fee			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 4111																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.21		6.86		8.07

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
954.33		5407.90		6362.23

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) Discover Corporate Card			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 30423			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">114930.60</div>		
City Salt Lake City	State UT	Zip Code 84130-0423	Date M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 5		
Purpose of Disbursement: Credit Card Fee			Transaction ID: H481027.E15477		
Activity or Event Identifier: ADMINISTRATION B 4111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.72		191.10		224.82

B. Full Name (Last, First, Middle Initial) Key Bank**			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1500 Edgewater St NW			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">121933.90</div>		
City Salem	State OR	Zip Code 97304-	Date M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 5		
Purpose of Disbursement: Bank Fee			Transaction ID: H481027.E15478		
Activity or Event Identifier: ADMINISTRATION B 4111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50		42.50		50.00

C. Full Name (Last, First, Middle Initial) Authnet Gateway Billing			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 293 Boston Post Rd W Ste 220			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: center;">114940.60</div>		
City Marlborough	State MA	Zip Code 01752-	Date M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 5		
Purpose of Disbursement: Credit Card Fee			Transaction ID: H481027.E15479		
Activity or Event Identifier: ADMINISTRATION B 4111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.50		8.50		10.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.72		242.10		284.82

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
CTS Holdings LLC

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

115807.70

Activity or Event Identifier:
ADMINISTRATION B 4111

Date 11 / 08 / 2005

Transaction ID: H481027.E15480

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.50		8.50		10.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.50		8.50		10.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
1306.11	7401.28	8707.39