REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

FEB 3 12 38 PM '98

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full): Oregon Bankers Political Action Committee

ADDRESS (number and street) ☐ Check if different than previously reported: 777 13th St. SE

CITY, STATE and ZIP CODE: Salem OR

2. FEC IDENTIFICATION NUMBER: C00035353

3. ☑ This committee has qualified as a multicandidate committee. (see FEC FORM 1M) Satisfied criteria of multi candidate status before 1-1-96

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☒ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____

☐ 30-Day Post-Election Report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY

5. Covering Period: July 1 '97 through Dec. 31 '97

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 19__		$ 386.43
	(b) Cash on Hand at Beginning of Reporting Period	$ 4531.43	
	(c) Total Receipts (from Line 19)	$ 6655.00	$ 10,800.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 11,186.43	$ 11,186.43
7.	Total Disbursements (from Line 30)	$ 10,172.00	$ 10,172.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 1014.43	$ 1014.43
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Signature of Treasurer: [signature] Date: 1/30/98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3X
(revised 9/93)

FE7AN047

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: Oregon Bankers Political Action Committee

REPORT COVERING PERIOD FROM: July 1 '97 TO: Dec. 31 '97

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	4190.00	4190.00	11a(i)
ii. Unitemized	2465.00	6610.00	11a(ii)
iii. Total (add i and ii) ➤			11a(iii)
b. Political Party Committees			11b)
c. Other Political Committees (such as PACs)			11c)
d. Total Contributions (add a iii, b and c) ➤	6655.00	10,800.00	11d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	6655.00	10,800.00	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	6655.00	10,800.00	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21a(i)
ii. Non-Federal Share			21a(ii)
b. Other Federal Operating Expenditures			21b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤			21c)
22. Transfers to Affiliated/Other Party Committees	10,172.00	10,172.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees			23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28a)
b. Political Party Committees			28b)
c. Other Political Committees (such as PACs)			28c)
d. Total Contribution Refunds (add a, b and c) ➤			28d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤			30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	10,172.00	10,172.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	6655.00	6655.00	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	6655.00	6655.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤			37

FE7ANDH7

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 2

FOR LINE NUMBER

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 committees.

NAME OF COMMITTEE (In Full)

Oregon Bankers Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J.L. Snider PO Box 1157 Cannon Beach, OR 97110 Receipt For: [X] Primary [ ] General [ ] Other (specify):	NINPPO Occupation: Insurance Sales Aggregate Year-to-Date > $ 800.00	12-16-97	$ 800.00
B. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
June Spence 735 Fifth Avenue Hammond, OR 97121 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Retired Aggregate Year-to-Date > $ 250.00	12-16-97	$ 250.00
C. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Jerry Miller 144 Ken Rose Ln. Cave Junction Receipt For: [X] Primary [ ] General [ ] Other (specify):	Self-employed Occupation: Restaurant owner Aggregate Year-to-Date > $ 620.00	12-18-97	$ 620.00
D. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Joel Petersson PO Box 302 Ione, OR 97843 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Farmer Aggregate Year-to-Date > $ 675.00	12-18-97	$ 675.00
E. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Robert Ward 921 Tokan Hts Grants Pass, OR 97526 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Home Valley Bank Occupation: Banker Aggregate Year-to-Date > $ 210.00	12-18-97	$ 210.00
F. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Ken Sherman Jr. 2736 Alvarado Terrace Salem, OR 97302 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Sherman, Sherman & Munch Occupation: Attorney Aggregate Year-to-Date > $ 225.00	12-18-97	$ 225.00
G. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Kevin Murphy 2100 Kimberly Circle Eugene, OR 97405 Receipt For: [X] Primary [ ] General [ ] Other (specify):	The Murphy Co. Occupation: Aggregate Year-to-Date > $ 450.00	12-18-97	$ 450.00

SUBTOTAL of Receipts This Page (optional) > 3230.00

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

FE7AN047

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 2

FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

Oregon Bankers Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Chris Gates 1117 NE Memorial Grants Pass, OR 97526 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Gate Furniture Occupation: owner/operator Aggregate Year-to-Date > $ 260.00	12-18-97	260.00
B. Ron Peery 2165 Ridgeway Dr. Eugene OR 97401 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Centennial Bank Occupation: banker Aggregate Year-to-Date > $ 250.00	12-18-97	250.00
C. Landon Brazier 7420 Phillips Rd SW Tacoma, Wa 98478 Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Knight Vale & Gregory Occupation: CPA Aggregate Year-to-Date > $ 450.00	12-18-97	450.00
D. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) > 960.00

TOTAL This Period (last page this line number only) > 4190.00

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE OF

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Oregon Bankers Political Action Comm.

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code ABA Bank PAC 1120 Connecticut Avenue Washington DC	Campaign cont. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1-8-97	4000.00
B. Full Name, Mailing Address and ZIP Code ABA Bank PAC 1120 Connecticut Ave. Washington D.C.	Purpose of Disbursement Camp - cont. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 12-17-97	Amount of Each Disbursement This Period 6172.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 10,172.00

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

FE7ABR97

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was recived.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
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☐	Electronic Filing	

PREPARER

2/3/98
DATE PREPARED

(7/97)