

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines Oregon Republican Party

ADDRESS (number and street) 2720 Commercial St SE #210 Check if different than previously reported. (ACC) Salem OR 97302

2. FEC IDENTIFICATION NUMBER C00153031 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, Convention, General, Special, Runoff (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 10 01 2005 through 10 31 2005

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

Type or Print Name of Treasurer Charles S. Oakes

Signature of Treasurer Electronically Filed by Charles S. Oakes Date 02 16 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5		44386.96
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period	7608.35									
(c) Total Receipts (from Line 19)	21134.00	298445.32								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	28742.35	342832.28								
7. Total Disbursements (from Line 31)	22951.85	337041.78								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5790.50	5790.50								
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)	94583.76									

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	0

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	5

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	6408.00	86845.50
(i) Itemized (use Schedule A)	14726.00	160108.03
(ii) Unitemized	21134.00	246953.53
(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)	0.00	21134.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	21134.00	247053.53
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	230.00
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))	21134.00	298445.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	21134.00	264744.69

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.....	855.00	18448.03
(ii) Non-Federal Share.....	4845.00	102911.68
(b) Other Federal Operating Expenditures.....	6404.58	65184.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	12104.58	186544.62
22. Transfers to Affiliated/Other Party Committees.....	0.00	15000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3728.62	3728.62
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	2830.93
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	7118.65	128937.61
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	7118.65	128937.61
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	22951.85	337041.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	18106.85	234130.10

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)	21134.00	247053.53
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21134.00	247053.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	7259.58	83632.94
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7259.58	83632.94

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 25
	<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 Republican Party

Full Name (Last, First, Middle Initial) A. Joan Austin		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address PO Box 209		Transaction ID: 51120.C85699	
City Newberg	State OR	Amount of Each Receipt this Period 1500.00	
Zip Code 97132-0209		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer A-dec, Inc.	Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12500.00		

Full Name (Last, First, Middle Initial) B. Bob and Deborra Buckler		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 3212 SE Ankeny St		Transaction ID: 51120.C85588	
City Portland	State OR	Amount of Each Receipt this Period 192.00	
Zip Code 97214-1944		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Old Laurelhurst Church	Occupation facilitator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.00		

Full Name (Last, First, Middle Initial) C. Stuart Ferguson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 2588 Ridgemont Drive		Transaction ID: 51120.C85595	
City Eugene	State OR	Amount of Each Receipt this Period 192.00	
Zip Code 97405		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Information Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.00		

SUBTOTAL of Receipts This Page (optional) ▶	1884.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Jeff and Sherri Grossman

Mailing Address 20630 NW Rock Spring Ln

City State Zip Code
Beaverton OR 97006

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

Name of Employer Occupation
Pacific Star Software Engineer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 292.00

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

Transaction ID: 51120.C85679

Amount of Each Receipt this Period
192.00

Receipt

B. Full Name (Last, First, Middle Initial)
Vaughn Huskey

Mailing Address 30950 SW River Lane Rd

City State Zip Code
West Linn OR 97068-8404

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

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

Transaction ID: 51120.C85835

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Charles Johnston

Mailing Address 68619 Shaw Road

City State Zip Code
Pilot Rock OR 97868

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

Name of Employer Occupation
Self-employed Physician

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: 100520050C84985

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	392.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
I. Jerome Kenagy

Mailing Address 955 Ranch Rd

City Reedsport State OR Zip Code 97467-1931

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 ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 51120.C85561

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Candace Kittle-Mize

Mailing Address 13477 SW Mountain Ridge Ct

City Tigard State OR Zip Code 97224

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

Name of Employer Mentor Graphics Corp. Occupation CPA - Accounting Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 184.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 51120.C85598

Amount of Each Receipt this Period
96.00

Receipt

C. Full Name (Last, First, Middle Initial)
Candace Kittle-Mize

Mailing Address 13477 SW Mountain Ridge Ct

City Tigard State OR Zip Code 97224

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

Name of Employer Mentor Graphics Corp. Occupation CPA - Accounting Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 51120.C85576

Amount of Each Receipt this Period
20.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	316.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Shiela Loeb

Mailing Address 2753 NE 15th St

City State Zip Code
Gresham OR 97030-4401

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
10 / 05 / 2005

Transaction ID: 51120.C85613

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Kevin Mannix

Mailing Address 375 18th St NE

City State Zip Code
Salem OR 97301

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

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
10 / 12 / 2005

Transaction ID: 51120.C85697

Amount of Each Receipt this Period
400.00

Receipt

C. Full Name (Last, First, Middle Initial)
Rodney Moore

Mailing Address P.O. Box 9309
0305 SW Montomery St. #506

City State Zip Code
Portland OR 97207

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

Name of Employer West Coast Seafood Processors Occupation Seafood Industry

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
10 / 03 / 2005

Transaction ID: 100520050C84996

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial) A. Sally Plumley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 8530 Helmick Rd		Transaction ID: 51120.C85557	
City Monmouth	State OR	Zip Code 97361-9559	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Information Requested	Occupation retired investor	Aggregate Year-to-Date ▼ 200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. James Russell		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address 1820 NE 104th Ave #66		Transaction ID: 51020.C85174	
City Portland	State OR	Zip Code 97220	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Information Requested	Occupation Retired	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Lawrence Smith		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 5	
Mailing Address 7778 SW Green Valley Ter		Transaction ID: 51120.C85499	
City Portland	State OR	Zip Code 97225-1568	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Information Requested	Occupation Information Requested	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 25
	<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

Full Name (Last, First, Middle Initial) A. C. Bruce Vichew		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address P.o. Box 3600		Transaction ID: 51120.C85696	
City Portland	State OR	Zip Code 97208-3500	Amount of Each Receipt this Period 1500.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) B. David Wheeler		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address PO Box 611		Transaction ID: 101020050C85015	
City Cottage Grove	State OR	Zip Code 97424-5765	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 200.00		

Full Name (Last, First, Middle Initial) C. Donna* Woolley		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 5	
Mailing Address PO Box 43		Transaction ID: 51120.C85698	
City Drain	State OR	Zip Code 97435-0043	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Eagles View Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation CEO Aggregate Year-to-Date ▼ 4500.00		

SUBTOTAL of Receipts This Page (optional) ▶	2600.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 12 / 25	
	(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"/> 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)
Solomon Yue

Mailing Address 265 50th Ave NW

City State Zip Code
Salem OR 97304-3221

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

Name of Employer Occupation
US Global Enterprising Co- President
rp

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: 51120.C85610

Amount of Each Receipt this Period
116.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	116.00
TOTAL This Period (last page this line number only)	▶	6408.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 25

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Leisha Adams Full Name (Last, First, Middle Initial) Mailing Address 300 S Everest Rd Unit 39 City Newberg State OR Zip Code 97132-2171 Purpose of Disbursement MEDICAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 51120.E11840 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 2819.41 Category/Type MEDICAL
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B. Leisha Adams Full Name (Last, First, Middle Initial) Mailing Address 300 S Everest Rd Unit 39 City Newberg State OR Zip Code 97132-2171 Purpose of Disbursement MEDICAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 51120.E11838 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 269.00 Category/Type MEDICAL
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C. Leisha Adams Full Name (Last, First, Middle Initial) Mailing Address 300 S Everest Rd Unit 39 City Newberg State OR Zip Code 97132-2171 Purpose of Disbursement MEDICAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 51120.E11839 Date of Disbursement 10 / 12 / 2005 Amount of Each Disbursement this Period 1271.77 Category/Type MEDICAL
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SUBTOTAL of Disbursements This Page (optional) ▶	4360.18
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial) A. Eschelon Teleco (Advanced Telecom)		Transaction ID: 51120.E11841 Date of Disbursement 10 / 26 / 2005	
Mailing Address PO Box 34988		Amount of Each Disbursement this Period 667.77	
City Seattle State WA Zip Code 98124-1988	Purpose of Disbursement PHONE BILL 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) ▼		

Full Name (Last, First, Middle Initial) B. Key bank		Transaction ID: 51120.E11844 Date of Disbursement 10 / 04 / 2005	
Mailing Address 1500 Edgewater St NW		Amount of Each Disbursement this Period 52.54	
City Salem State OR Zip Code 97304-	Purpose of Disbursement BANK FEE-AUTHNET-CTS 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) ▼		

Full Name (Last, First, Middle Initial) C. Depot** Office		Transaction ID: 51120.E11836 Date of Disbursement 10 / 07 / 2005	
Mailing Address 2945 Liberty St S		Amount of Each Disbursement this Period 213.29	
City Salem State OR Zip Code 97306-	Purpose of Disbursement BUSINESS CARDS 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) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	933.60
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 15 / 25

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial) A. Pitney Bowes Credit Corp		Transaction ID: 51120.E11832 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 5
Mailing Address P. O. Box 85460		Amount of Each Disbursement this Period 262.70
City Louisville State KY Zip Code 40285-5460	POSTAGE MACHINE LEASE	
Purpose of Disbursement POSTAGE MACHINE LEASE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Pitney Bowes Credit Corp		Transaction ID: 51120.E11835 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 5
Mailing Address P. O. Box 85460		Amount of Each Disbursement this Period 262.70
City Louisville State KY Zip Code 40285-5460	POSTAGE MACHINE LEASE	
Purpose of Disbursement POSTAGE MACHINE LEASE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Pitney Bowes Credit Corp		Transaction ID: 51120.E11833 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address P. O. Box 85460		Amount of Each Disbursement this Period 262.70
City Louisville State KY Zip Code 40285-5460	POSTAGE MACHINE LEASE	
Purpose of Disbursement POSTAGE MACHINE LEASE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	788.10
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial) A. Pitney Bowes Credit Corp		Transaction ID: 51120.E11834	
Mailing Address P. O. Box 85460		Date of Disbursement 10 / 24 / 2005	
City Louisville	State KY	Zip Code 40285-5460	Amount of Each Disbursement this Period 262.70
Purpose of Disbursement POSTAGE MACHINE LEASE		POSTAGE MACHINE LEASE	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
State:	District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	262.70
TOTAL This Period (last page this line number only)	6344.58

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial) A. Key bank		Transaction ID: 51120.E11828	
Mailing Address 1500 Edgewater St NW		Date of Disbursement 10 / 01 / 2005	
City Salem	State OR	Zip Code 97304-	Amount of Each Disbursement this Period 2485.76
Purpose of Disbursement FEA PAYROLL TAXES		Category/Type	
Candidate Name		FEA PAYROLL TAXES	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Key bank		Transaction ID: 51120.E11829	
Mailing Address 1500 Edgewater St NW		Date of Disbursement 10 / 15 / 2005	
City Salem	State OR	Zip Code 97304-	Amount of Each Disbursement this Period 1242.86
Purpose of Disbursement FEA PAYROLL TAXES		Category/Type	
Candidate Name		FEA PAYROLL TAXES	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	3728.62
TOTAL This Period (last page this line number only)	3728.62

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial) A. Amy Langdon		Transaction ID: 51120.E11824 Date of Disbursement 10 / 01 / 2005	
Mailing Address 2830 Foxhaven Dr S		Amount of Each Disbursement this Period 2069.94	
City Salem State OR Zip Code 97306-	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

Full Name (Last, First, Middle Initial) B. Amy Langdon		Transaction ID: 51120.E11825 Date of Disbursement 10 / 15 / 2005	
Mailing Address 2830 Foxhaven Dr S		Amount of Each Disbursement this Period 2069.96	
City Salem State OR Zip Code 97306-	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

Full Name (Last, First, Middle Initial) C. Oregon Department of Revenue		Transaction ID: 51120.E11830 Date of Disbursement 10 / 01 / 2005	
Mailing Address PO Box 14800		Amount of Each Disbursement this Period 538.00	
City Salem State OR Zip Code 97309-	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

SUBTOTAL of Disbursements This Page (optional) ▶	4677.90
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial) A. Oregon Department of Revenue		Transaction ID: 51120.E11831 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 5
Mailing Address PO Box 14800		Amount of Each Disbursement this Period 269.00
City Salem State OR Zip Code 97309-	FEA PAYROLL TAXES	
Purpose of Disbursement FEA PAYROLL TAXES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Oregon Department of Revenue		Transaction ID: 51120.E11842 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address PO Box 14800		Amount of Each Disbursement this Period 280.72
City Salem State OR Zip Code 97309-	FEA PAYROLL TAXES	
Purpose of Disbursement FEA PAYROLL TAXES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Cindy Wolfe		Transaction ID: 51120.E11826 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 5
Mailing Address 595 Rockwood St SE		Amount of Each Disbursement this Period 945.52
City Salem State OR Zip Code 97306-1756	FEA PAYROLL	
Purpose of Disbursement FEA PAYROLL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1495.24
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 20 / 25

<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

Full Name (Last, First, Middle Initial)

A. Cindy Wolfe

Mailing Address 595 Rockwood St SE

City Salem State OR Zip Code 97306-1756

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 51120.E11827

Date of Disbursement

10 / 15 / 2005

Amount of Each Disbursement this Period

945.51

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

945.51

TOTAL This Period (last page this line number only)

7118.65

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 FL&S	Nature of Debt (Purpose): telemarketing
Mailing Address 7320 N Dreamy Draw Dr	
City State ZIP Code Phoenix AZ 85020-5212	

Outstanding Balance Beginning This Period 22811.30	Transaction ID: 4LSE11265	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 22811.30

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

Outstanding Balance Beginning This Period 2564.49	Transaction ID: 6LSE8349	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2564.49

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

Outstanding Balance Beginning This Period 348.88	Transaction ID: 8LSE11694	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 348.88

1) SUBTOTALS This Period This Page (optional).....	▶	25724.67
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

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

Outstanding Balance Beginning This Period <input type="text" value="1016.99"/>	Transaction ID: 5LSE9184	
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="1016.99"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Eagle Teleconferencing	Nature of Debt (Purpose): phone bill
Mailing Address 207 West Washington Street	
City State ZIP Code Rushville IL 62681-	

Outstanding Balance Beginning This Period <input type="text" value="473.30"/>	Transaction ID: 2LSE11695	
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="473.30"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T Wireless	Nature of Debt (Purpose): Cell phone bills
Mailing Address PO Box 79075	
City State ZIP Code Phoenix AZ 85062-	

Outstanding Balance Beginning This Period <input type="text" value="67180.90"/>	Transaction ID: 3LSE11336	
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"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="68671.19"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS 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 Connolly & Goldian			Nature of Debt (Purpose): legal fees
Mailing Address PO Box 3095			
City Salem	State OR	ZIP Code 97302-	

Outstanding Balance Beginning This Period 187.90		Transaction ID: 1LS50920.E11779	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 187.90	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Eschelon Teleco (Advanced Telecom)			Nature of Debt (Purpose): phone bill
Mailing Address PO Box 34988			
City Seattle	State WA	ZIP Code 98124-1988	

Outstanding Balance Beginning This Period 667.77		Transaction ID: LS51120.E11841	
Amount Incurred This Period 0.00	Payment This Period 667.77	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	187.90
2) TOTALS This Period (last page this line number only).....	94583.76
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	[]
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	[]

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
Oregon Republican Party

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- X Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

- Administrative Generic Voter Drive Public Communications Referencing Party Only

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Certified Property

Mailing Address
PO Box 269

City	State	Zip Code
Salem	OR	97308-0269

Purpose of Disbursement:
office rent - October

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

120197.59

Activity or Event Identifier:
ADMINISTRATION B 41

Date / /
10 / 10 / 2005

Transaction ID: H451120.E11837

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
855.00		4845.00		5700.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
855.00		4845.00		5700.00

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
855.00		4845.00		5700.00