

# 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

Holding Onto Oregon's Priorities

ADDRESS (number and street) PO Box 3314  
Check if different than previously reported. (ACC) Portland OR 97208

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00392738

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day **PRE-Election** Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

- (d) 30-Day **Post -Election** Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 04 01 2010 through 06 30 2010

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 Ms. Melissa Kardon

Signature of Treasurer Electronically Filed by Ms. Melissa Kardon Date 07 15 2010

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

Office Use Only							
-----------------	--	--	--	--	--	--	--

**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Holding Onto Oregon's Priorities

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		25682.20
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	36282.26									
(c) Total Receipts (from Line 19) .....	64000.00	107700.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	100282.26	133382.20								
7. Total Disbursements (from Line 31) .....	72619.12	105719.06								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	27663.14	27663.14								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Holding Onto Oregon's Priorities

Report Covering the Period: From:    To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	0.00	7500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	7500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	18000.00	23000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	18000.00	30500.00
12. Transfers From Affiliated/Other Party Committees .....	46000.00	77200.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	64000.00	107700.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	64000.00	107700.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	16119.12	30219.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	16119.12	30219.06
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	26000.00	41000.00
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.....	30500.00	34500.00
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 .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	72619.12	105719.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	72619.12	105719.06

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 29

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) .....	18000.00	30500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	18000.00	30500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	16119.12	30219.06
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	16119.12	30219.06

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 6 / 29</span>
	(check only one)
<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
Holding Onto Oregon's Priorities

<b>A.</b>	Full Name (Last, First, Middle Initial) BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)	Date of Receipt
	Mailing Address P.O. Box 961039 Suite 220	<input type="text" value="05"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City State Zip Code Fort Worth TX 76161	<b>Transaction ID:</b> SA11C.6223
	FEC ID number of contributing federal political committee. <input type="text" value="C00235739"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE	Date of Receipt
	Mailing Address 101 Constitution Ave. NW Suite 500 West	<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
	City State Zip Code Washington DC 20001	<b>Transaction ID:</b> SA11C.6286
	FEC ID number of contributing federal political committee. <input type="text" value="C00096156"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE	Date of Receipt
	Mailing Address 1295 State Street	<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City State Zip Code Springfield MA 01111	<b>Transaction ID:</b> SA11C.6284
	FEC ID number of contributing federal political committee. <input type="text" value="C00118943"/>	Amount of Each Receipt this Period <input type="text" value="2000.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="2000.00"/>	Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="12000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 29  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  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)  
Holding Onto Oregon's Priorities

**A.** Full Name (Last, First, Middle Initial)  
MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1295 State Street

City State Zip Code  
Springfield MA 01111

FEC ID number of contributing federal political committee. C C00118943

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt MM / DD / YYYY  
06 / 30 / 2010

**Transaction ID:** SA11C.6297

Amount of Each Receipt this Period 2000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
OPPENHEIMERFUNDS, INC. POLITICAL ACTION COMMITTEE

Mailing Address Two World Financial Ct, 11th Floor  
225 Liberty Street

City State Zip Code  
New York NY 10281-1008

FEC ID number of contributing federal political committee. C C00367920

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** SA11C.6285

Amount of Each Receipt this Period 1000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Mailing Address 600 13th St., NW  
Suite 340

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. C C00010470

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY  
05 / 13 / 2010

**Transaction ID:** SA11C.6229

Amount of Each Receipt this Period 2000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... 5000.00

**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 8 / 29
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)  
Holding Onto Oregon's Priorities

<b>A.</b>	Full Name (Last, First, Middle Initial) UNITED HEALTH SERVICES PAC, INC.		Date of Receipt
	Mailing Address 211 East Doyle Street		<input type="text" value="04"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Toccoa	GA	30577
	FEC ID number of contributing federal political committee.		<input type="text" value="C00400135"/>
	Transaction ID: SA11C.6220		Amount of Each Receipt this Period
Name of Employer		Occupation	<input type="text" value="1000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Contribution	
Aggregate Year-to-Date ▼		<input type="text" value="1000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="18000.00"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 29  
(check only one)

11a  11b  11c  12  
 13  14  15  16  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)  
Holding Onto Oregon's Priorities

**A.** Full Name (Last, First, Middle Initial)  
WYDEN FOR OREGON

Mailing Address 2911 NE HANCOCK STREET

City State Zip Code  
PORTLAND OR 97212

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
41200.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 27 / 2010

**Transaction ID:** SA12.6239

Amount of Each Receipt this Period  
10000.00

Jt Fundraising Contribution

**B.** Full Name (Last, First, Middle Initial)  
Al Jubitz

Mailing Address 5505 SW Hewett Blvd

City State Zip Code  
Portland OR 97221

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

Name of Employer Occupation  
Jubitz Family Foundation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 27 / 2010

**Transaction ID:** SA12.6239.0

Amount of Each Receipt this Period  
1200.00

Contribution

**[MEMO ITEM]**

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

Mailing Address 4945 NW 186th Ave

City State Zip Code  
Portland OR 97229

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

Name of Employer Occupation  
None Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 27 / 2010

**Transaction ID:** SA12.6239.1

Amount of Each Receipt this Period  
200.00

Contribution

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10000.00**

**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 10 / 29  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  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)  
Holding Onto Oregon's Priorities

**A.** Full Name (Last, First, Middle Initial)  
Paul Rosenbaum

Mailing Address 2945 NW Luray Terrace

City State Zip Code  
Portland OR 97210

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

Name of Employer Occupation  
Rentrak CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1900.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2010

Transaction ID: SA12.6239.2

Amount of Each Receipt this Period  
1900.00

Contribution  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Harvey Platt

Mailing Address 4343 SW Greenleaf Drive

City State Zip Code  
Portland OR 97221

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

Name of Employer Occupation  
Platt Electric CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2010

Transaction ID: SA12.6239.3

Amount of Each Receipt this Period  
1200.00

Contribution  
**[MEMO ITEM]**

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

Mailing Address 615 SW Burlingame Terrace

City State Zip Code  
Portland OR 97201

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

Name of Employer Occupation  
Centrisoft Corporation Chairman & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2010

Transaction ID: SA12.6239.4

Amount of Each Receipt this Period  
2600.00

Contribution  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 29  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  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)  
Holding Onto Oregon's Priorities

**A.** Full Name (Last, First, Middle Initial)  
Lillian Chapman  
 Mailing Address 615 SW Burlingame Terrace  
 City State Zip Code  
 Portland OR 97201  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 2 7 / 2 0 1 0  
**Transaction ID:** SA12.6239.5  
 Amount of Each Receipt this Period  
 2600.00  
 Contribution  
**[MEMO ITEM]**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2600.00

**B.** Full Name (Last, First, Middle Initial)  
WYDEN FOR OREGON  
 Mailing Address 2911 NE HANCOCK STREET  
 City State Zip Code  
 PORTLAND OR 97212  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 5 / 2 0 1 0  
**Transaction ID:** SA12.6251  
 Amount of Each Receipt this Period  
 15000.00  
 Jt Fundraising Contributi-  
 on  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 56200.00

**C.** Full Name (Last, First, Middle Initial)  
Confederated Tribe Siletz Indians  
 Mailing Address PO Box 549  
 City State Zip Code  
 Siletz OR 97380  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 5 / 2 0 1 0  
**Transaction ID:** SA12.6251.0  
 Amount of Each Receipt this Period  
 5000.00  
 Contribution  
**[MEMO ITEM]**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 15000.00  
**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 12 / 29  
(check only one)

11a  11b  11c  12  
 13  14  15  16  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)  
Holding Onto Oregon's Priorities

**A.** Full Name (Last, First, Middle Initial)  
Mr. Harold Schnitzer

Mailing Address 1121 SW Salmon Street

City State Zip Code  
Portland OR 97205

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

Name of Employer: Harsch Investment Corporation  
Occupation: President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt: 05 / 15 / 2010  
Transaction ID: SA12.6251.1  
Amount of Each Receipt this Period: 2500.00  
Contribution  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jordan Schnitzer

Mailing Address 1121 SW Salmon Street

City State Zip Code  
Portland OR 97205

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

Name of Employer: Harsch Investment Properties, LLC  
Occupation: President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4800.00

Date of Receipt: 05 / 15 / 2010  
Transaction ID: SA12.6251.2  
Amount of Each Receipt this Period: 4800.00  
Contribution  
**[MEMO ITEM]**

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

Mailing Address 1017 SW Rivington Drive

City State Zip Code  
Portland OR 97201

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

Name of Employer: None  
Occupation: Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2400.00

Date of Receipt: 05 / 15 / 2010  
Transaction ID: SA12.6251.3  
Amount of Each Receipt this Period: 2400.00  
Contribution  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 29  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  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)  
Holding Onto Oregon's Priorities

**A.** Full Name (Last, First, Middle Initial)  
Helen Stern

Mailing Address 1017 SW Rivington Dr

City State Zip Code  
Portland OR 97201-3148

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

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

Transaction ID: SA12.6251.4

Amount of Each Receipt this Period  
2400.00

Contribution  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Dan Giustina

Mailing Address Box 529

City State Zip Code  
Eugene OR 97440

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

Name of Employer Giustina Resources Occupation Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

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

Transaction ID: SA12.6251.5

Amount of Each Receipt this Period  
800.00

Contribution  
**[MEMO ITEM]**

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

Mailing Address 19321 SE River Drive Ct.

City State Zip Code  
Milwaukie OR 97267

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

Name of Employer Oregon Iron Works Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

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

Transaction ID: SA12.6251.6

Amount of Each Receipt this Period  
2000.00

Contribution  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

**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 14 / 29  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  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)  
Holding Onto Oregon's Priorities

**A.** Full Name (Last, First, Middle Initial)  
Timothy Boyle

Mailing Address PO Box 8307

City State Zip Code  
Portland OR 97207

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

Name of Employer Occupation  
Columbia Sportswear CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 05 / 15 / 2010  
Transaction ID: SA12.6251.7  
Amount of Each Receipt this Period: 400.00  
Contribution  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Earl Ray Lewis

Mailing Address 87 Pinckney St.

City State Zip Code  
Boston MA 02114

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

Name of Employer Occupation  
Flir Systems CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt: 05 / 15 / 2010  
Transaction ID: SA12.6251.8  
Amount of Each Receipt this Period: 200.00  
Contribution  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
WYDEN FOR OREGON

Mailing Address 2911 NE HANCOCK STREET

City State Zip Code  
PORTLAND OR 97212

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 58200.00

Date of Receipt: 05 / 24 / 2010  
Transaction ID: SA12.6231  
Amount of Each Receipt this Period: 2000.00  
Jt Fundraising Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2000.00

**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 15 / 29  
(check only one)

11a  11b  11c  12  
 13  14  15  16  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)  
Holding Onto Oregon's Priorities

**A.**

Full Name (Last, First, Middle Initial)  
William Furman

Mailing Address One Centerpointe Dr.  
Suite 200

City State Zip Code  
Lake Oswego OR 97035

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

Name of Employer Occupation  
Greenbrier Cos. CEO/President

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

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

Transaction ID: SA12.6231.0

Amount of Each Receipt this Period  
2000.00

Contribution

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
WYDEN FOR OREGON

Mailing Address 2911 NE HANCOCK STREET

City State Zip Code  
PORTLAND OR 97212

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

Name of Employer Occupation

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 68200.00

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

Transaction ID: SA12.6234

Amount of Each Receipt this Period  
10000.00

Jt Fundraising Contributi-  
on

**C.**

Full Name (Last, First, Middle Initial)  
Maria Smith

Mailing Address 22111 Riverwood Rd

City State Zip Code  
Dundee OR 97115

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: SA12.6234.0

Amount of Each Receipt this Period  
5000.00

Contribution

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10000.00**

**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 16 / 29  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  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)  
Holding Onto Oregon's Priorities

**A.** Full Name (Last, First, Middle Initial)  
Delford Smith

Mailing Address 22111 Riverwood Rd

City State Zip Code  
Dundee OR 97115

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

Name of Employer Occupation  
Evergreen Int'l Aviation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2010

**Transaction ID:** SA12.6234.1

Amount of Each Receipt this Period  
5000.00

Contribution  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
WYDEN FOR OREGON

Mailing Address 2911 NE HANCOCK STREET

City State Zip Code  
PORTLAND OR 97212

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 71200.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** SA12.6281

Amount of Each Receipt this Period  
3000.00

Jt Fundraising Contribution Distribution

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

Mailing Address PO Box 8

City State Zip Code  
Government Camp OR 97028-0008

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

Name of Employer Occupation  
Timberline Lodge Ski Area Operator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2010

**Transaction ID:** SA12.6281.0

Amount of Each Receipt this Period  
3000.00

Contribution  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

**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 17 / 29
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 12
	<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)  
Holding Onto Oregon's Priorities

**A.**

Full Name (Last, First, Middle Initial) WYDEN FOR OREGON		Date of Receipt
Mailing Address 2911 NE HANCOCK STREET		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
City	State	Zip Code
PORTLAND	OR	97212
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: SA12.6296
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="6000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Jt Fundraising Contributions Distribution
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="77200.00"/>	
<input type="checkbox"/> Other (specify) ▼		

**B.**

Full Name (Last, First, Middle Initial) John Jaqua		Date of Receipt
Mailing Address 34320 McKenzie Oaks Ranch		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
City	State	Zip Code
Eugene	OR	97408
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: SA12.6296.0
Name of Employer	Occupation	Amount of Each Receipt this Period
None	Retired	<input type="text" value="800.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Contribution
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="800.00"/>	[MEMO ITEM]
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="6000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="46000.00"/>

**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 18 / 29

<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

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)  
Holding Onto Oregon's Priorities

A.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: SB21B.6225 Date of Disbursement
	Mailing Address 4099 SE International Way Suite 203	<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City Milwaukie State OR Zip Code 97222	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes Candidate Name	<input type="text" value="14.53"/>
	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) ▼
		<input type="text" value="001"/> Category/ Type

B.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: SB21B.6227 Date of Disbursement
	Mailing Address 4099 SE International Way Suite 203	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Milwaukie State OR Zip Code 97222	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes Candidate Name	<input type="text" value="1631.44"/>
	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) ▼
		<input type="text" value="001"/> Category/ Type

C.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: SB21B.6228 Date of Disbursement
	Mailing Address 4099 SE International Way Suite 203	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Milwaukie State OR Zip Code 97222	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Processing Fees Candidate Name	<input type="text" value="84.61"/>
	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) ▼
		<input type="text" value="001"/> Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1730.58"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 29

<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

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)  
Holding Onto Oregon's Priorities

A.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: SB21B.6301 Date of Disbursement 05 / 28 / 2010
	Mailing Address 4099 SE International Way Suite 203	Amount of Each Disbursement this Period 1631.44
	City Milwaukie State OR Zip Code 97222	
	Purpose of Disbursement Payroll Taxes Candidate Name	001 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) ▼

B.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: SB21B.6302 Date of Disbursement 05 / 28 / 2010
	Mailing Address 4099 SE International Way Suite 203	Amount of Each Disbursement this Period 82.61
	City Milwaukie State OR Zip Code 97222	
	Purpose of Disbursement Payroll Processing Fees Candidate Name	001 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) ▼

C.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: SB21B.6304 Date of Disbursement 06 / 30 / 2010
	Mailing Address 4099 SE International Way Suite 203	Amount of Each Disbursement this Period 1631.44
	City Milwaukie State OR Zip Code 97222	
	Purpose of Disbursement Payroll Taxes Candidate Name	001 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3345.49
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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

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)  
Holding Onto Oregon's Priorities

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) ADP</p> <p>Mailing Address 4099 SE International Way Suite 203</p> <p>City Milwaukie State OR Zip Code 97222</p> <p>Purpose of Disbursement Payroll Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6305</p> <p>Date of Disbursement 06 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 82.61</p> <p>001 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 53132</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Credit Card Payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6268</p> <p>Date of Disbursement 05 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 51.35</p> <p>001 Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 53132</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Credit Card Payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6288</p> <p>Date of Disbursement 06 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 159.99</p> <p>001 Category/ Type</p>

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

293.95

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 29

<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

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)  
Holding Onto Oregon's Priorities

A.	Full Name (Last, First, Middle Initial) Democratic Party of Oregon	Transaction ID: SB21B.6217 Date of Disbursement
	Mailing Address 232 NE 9th Ave. Suite 105	<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City Portland State OR Zip Code 97232	Amount of Each Disbursement this Period
	Purpose of Disbursement Event Tickets	<input type="text" value="1170.00"/>
	Candidate Name	<input type="text" value="001"/> 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) ▼

B.	Full Name (Last, First, Middle Initial) Ms. Melissa Kardon	Transaction ID: SB21B.6169 Date of Disbursement
	Mailing Address 2911 NE Hancock	<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Portland State OR Zip Code 97212	Amount of Each Disbursement this Period
	Purpose of Disbursement Reimbursement for Internet Service	<input type="text" value="47.99"/>
	Candidate Name	<input type="text" value="001"/> 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) ▼

C.	Full Name (Last, First, Middle Initial) Ms. Melissa Kardon	Transaction ID: SB21B.6226 Date of Disbursement
	Mailing Address 2911 NE Hancock	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Portland State OR Zip Code 97212	Amount of Each Disbursement this Period
	Purpose of Disbursement Salary	<input type="text" value="2551.14"/>
	Candidate Name	<input type="text" value="001"/> 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3769.13"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 29

<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

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)  
Holding Onto Oregon's Priorities

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Melissa Kardon Mailing Address 2911 NE Hancock City Portland State OR Zip Code 97212 Purpose of Disbursement Reimbursement for Internet Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.6222 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 1 0	Amount of Each Disbursement this Period 47.99
<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Melissa Kardon Mailing Address 2911 NE Hancock City Portland State OR Zip Code 97212 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.6300 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 8 / 2 0 1 0	Amount of Each Disbursement this Period 2551.14
<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Melissa Kardon Mailing Address 2911 NE Hancock City Portland State OR Zip Code 97212 Purpose of Disbursement Reimbursement for Internet Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.6287 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 1 0	Amount of Each Disbursement this Period 47.99

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2647.12
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 29

<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

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)  
Holding Onto Oregon's Priorities

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Melissa Kardon Mailing Address 2911 NE Hancock City Portland State OR Zip Code 97212 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.6303 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 1 0	Amount of Each Disbursement this Period 2551.14
<b>B.</b>	Full Name (Last, First, Middle Initial) Oregon Assembly for Black Affairs Mailing Address P.O. Box 12485 City Salem State OR Zip Code 97309 Purpose of Disbursement Event Tickets Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.6214 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 1 0	Amount of Each Disbursement this Period 400.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Oregon League of Conservation Voters Mailing Address 320 SW Stark Suite 415 City Portland State OR Zip Code 97204 Purpose of Disbursement Event Tickets Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.6213 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 1 0	Amount of Each Disbursement this Period 1250.00

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

4201.14

**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 24 / 29

<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

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)  
Holding Onto Oregon's Priorities

**A.**

Full Name (Last, First, Middle Initial)  
Verizon

**Transaction ID:** SB21B.6270  
Date of Disbursement

Mailing Address P.O. Box 19707

/   /

City Irvine State CA Zip Code 92623-9707

Amount of Each Disbursement this Period

Purpose of Disbursement  
Telephone Service

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
Verizon

**Transaction ID:** SB21B.6289  
Date of Disbursement

Mailing Address P.O. Box 19707

/   /

City Irvine State CA Zip Code 92623-9707

Amount of Each Disbursement this Period

Purpose of Disbursement  
Telephone Service

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

**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 26 / 29

<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

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)  
Holding Onto Oregon's Priorities

A.	Full Name (Last, First, Middle Initial) KURT SCHRADER FOR CONGRESS	Transaction ID: SB23.6309 Date of Disbursement 05 / 18 / 2010
	Mailing Address 607 N. Main St Suite 240	Amount of Each Disbursement this Period 5000.00
	City Oregon City State OR Zip Code 97045	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 05	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LEAHY FOR U.S. SENATOR COMMITTEE	Transaction ID: SB23.6292 Date of Disbursement 06 / 30 / 2010
	Mailing Address PO BOX 1042	Amount of Each Disbursement this Period 5000.00
	City MONTPELIER State VT Zip Code 05601	
	Purpose of Disbursement Contributions Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) LEAHY FOR U.S. SENATOR COMMITTEE	Transaction ID: SB23.6294 Date of Disbursement 06 / 30 / 2010
	Mailing Address PO BOX 1042	Amount of Each Disbursement this Period 5000.00
	City MONTPELIER State VT Zip Code 05601	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	15000.00
<b>TOTAL</b> This Period (last page this line number only) .....	26000.00

**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 27 / 29

<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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
Holding Onto Oregon's Priorities

A.	Full Name (Last, First, Middle Initial) Committee to Elect Loretta Smith	Transaction ID: SB29.6277 Date of Disbursement
	Mailing Address 2236 SE 10th Ave	<input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City Portland State OR Zip Code 97214	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="5000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Friends of Ted Wheeler	Transaction ID: SB29.6279 Date of Disbursement
	Mailing Address 2236 Se 10th Ave	<input type="text" value="05"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City Portland State OR Zip Code 97214	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="2500.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Friends of Will Rasmussen	Transaction ID: SB29.6298 Date of Disbursement
	Mailing Address 1980 Willamette Falls Dr Suite 120	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City West Linn State OR Zip Code 97068	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="1000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="8500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 28 / 29

<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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
Holding Onto Oregon's Priorities

A.	Full Name (Last, First, Middle Initial) Kitzhaber for Governor	Transaction ID: SB29.6272 Date of Disbursement 05 / 17 / 2010
	Mailing Address 3016 SE Division St.	Amount of Each Disbursement this Period 5000.00
	City Portland State OR Zip Code 97202	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kitzhaber for Governor	Transaction ID: SB29.6274 Date of Disbursement 05 / 17 / 2010
	Mailing Address 3016 SE Division St.	Amount of Each Disbursement this Period 5000.00
	City Portland State OR Zip Code 97202	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Senate Democratic Leadership Fund	Transaction ID: SB29.6219 Date of Disbursement 04 / 20 / 2010
	Mailing Address P.O. Box 5271	Amount of Each Disbursement this Period 10000.00
	City Portland State OR Zip Code 97208	
	Purpose of Disbursement Contribution Candidate Name	011 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	20000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 29

<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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
Holding Onto Oregon's Priorities

A.

Full Name (Last, First, Middle Initial)  
Susan Castillo for Superintendent of Public Instruction

Transaction ID: SB29.6176

Date of Disbursement

Mailing Address 2236 SE 10th Avenue

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

City State Zip Code  
Portland OR 97214

Amount of Each Disbursement this Period

2000.00
---------

Purpose of Disbursement  
Contribution

011
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

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

2000.00
---------

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

30500.00
----------