

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 4 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 5 |

 To:

| | |
|---|---|
| M | M |
| 0 | 4 |

| | |
|---|---|
| D | D |
| 3 | 0 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 5 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|----------|
| 6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 5 | | 44386.96 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 5 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 39740.76 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 34301.00 | 159105.82 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 74041.76 | 203492.78 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 37243.05 | 166694.07 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 36798.71 | 36798.71 | | | | | | | | |
| 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) | 83484.79 | | | | | | | | | |

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 |
| 0 | 4 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 5 |

 To:

| | |
|---|---|
| M | M |
| 0 | 4 |

| | |
|---|---|
| D | D |
| 3 | 0 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 5 |

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | 10050.00 | 20360.00 |
| (i) Itemized (use Schedule A) | 24251.00 | 87584.03 |
| (ii) Unitemized | 34301.00 | 107944.03 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 34301.00 | 107944.03 |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 17461.16 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 0.00 | 33700.63 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 33700.63 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 34301.00 | 159105.82 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 34301.00 | 125405.19 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| 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..... | 2680.64 | 10674.63 |
| (ii) Non-Federal Share..... | 15190.25 | 58862.56 |
| (b) Other Federal Operating Expenditures..... | 4696.06 | 24994.64 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶ | 22566.95 | 94531.83 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 10000.00 |
| 23. Contributions to Federal Candidates/Committees..... and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 |
| 29. Other Disbursements..... | 0.00 | 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 | 14676.10 | 59331.31 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 14676.10 | 59331.31 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 37243.05 | 166694.07 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 22052.80 | 107831.51 |

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) | 34301.00 | 107944.03 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 34301.00 | 107944.03 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 7376.70 | 35669.27 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 7376.70 | 35669.27 |

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 / 28 |
| | <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 |

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
John Alltucker

Mailing Address 88855 Lynette Ln

City Veneta State OR Zip Code 97487

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

Name of Employer Information Requested Occupation Corp. Exec.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 0 5

Transaction ID: C82856

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Steven Anderson

Mailing Address 14100 Heritage Ln

City Arlington State OR Zip Code 97812

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

Name of Employer Self Occupation Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 3 / 2 0 0 5

Transaction ID: C82458

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Joan Austin

Mailing Address PO Box 209

City Newberg State OR Zip Code 97132-0209

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

Name of Employer A-dec, Inc. Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 8 / 2 0 0 5

Transaction ID: C82868

Amount of Each Receipt this Period
1000.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1750.00 |
| 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 / 28 |
| | <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)
Charles Carlson

Mailing Address 1311 Victorian Way

City Eugene State OR Zip Code 97401-7020

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

Name of Employer Information Requested Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
04 / 18 / 2005

Transaction ID: C82985

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Robert Flowerree

Mailing Address 1322 SE Lava Drive

City Milwaukie State OR Zip Code 97222-7417

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

Name of Employer Flowerree Foundation Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
04 / 06 / 2005

Transaction ID: C82691

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Richard & Janet Geary

Mailing Address 1211 SW 5th Ave., Suite 2980

City Portland State OR Zip Code 97204

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

Name of Employer Information Requested Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
04 / 12 / 2005

Transaction ID: C82904

Amount of Each Receipt this Period
1000.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1350.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 / 28 |
| | <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)
Dorothy Harrison

Mailing Address 895 Park Ave

City State Zip Code
Eugene OR 97404

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 ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 5

Transaction ID: C82697

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Andrew Honzel

Mailing Address 12929 Forest Meadows Way

City State Zip Code
Lake Oswego OR 97034-1593

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

Name of Employer Columbia Forest Products Occupation Wood Products Exec.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C82951

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
George Jacobsen

Mailing Address 2700 SE Tacoma St

City State Zip Code
Portland OR 97202-8941

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

Name of Employer Pacific/Hue Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 7 / 2 0 0 5

Transaction ID: C82789

Amount of Each Receipt this Period
200.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1450.00 |
| 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 / 28 |
| | <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)
Eliot Jenkins

Mailing Address 13169 SE River Rd # 307 T

| | | |
|----------|-------|------------|
| City | State | Zip Code |
| Portland | OR | 97222-5023 |

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

| | |
|--|------------|
| Name of Employer Information Requested | Occupation |
| | Retired |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 0 | 7 | / | 2 | 0 | 0 | 5 |

Transaction ID: C82761

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Kenneth & Jennette Knott

Mailing Address 59926 Comstock Rd.

| | | |
|------|-------|----------|
| City | State | Zip Code |
| Cove | OR | 97824 |

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

| | |
|-----------------------|------------|
| Name of Employer Self | Occupation |
| | Rancher |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 5 | / | 2 | 0 | 0 | 5 |

Transaction ID: C83092

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Lavonne Koenig

Mailing Address PO Box 410

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Aurora | OR | 97002 |

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 ▼
300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 0 | 4 | / | 2 | 0 | 0 | 5 |

Transaction ID: C82545

Amount of Each Receipt this Period
300.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1550.00 |
| 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 / 28 |
| | <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)
Lawrence Lahm

Mailing Address 3855 NW Van Buren Ave

City State Zip Code
Corvallis OR 97330-4920

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 ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 7 / 2 0 0 5

Transaction ID: C82762

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
George Mack

Mailing Address 4380 SW Macadam #590

City State Zip Code
Portland OR 97201-6408

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

Name of Employer Mack, Roberts Occupation Certified Public Accountant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

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

Transaction ID: C82624

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Laura Meier

Mailing Address 2011 SW Carter Lane

City State Zip Code
Portland OR 97201

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

Name of Employer AMCO Inc. Occupation financial advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: C82592

Amount of Each Receipt this Period
1000.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1700.00 |
| 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 / 28 |
| | <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. J. Franklin Morse | | Date of Receipt MM / DD / YYYY 04 / 26 / 2005 |
| Mailing Address 3616 NW Eagle View Drive | | Transaction ID: C83111 |
| City Albany | State OR | Zip Code 97321 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer State of Oregon | Occupation State Senator | Receipt |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 200.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Gerald Moshofsky | | Date of Receipt MM / DD / YYYY 04 / 22 / 2005 |
| Mailing Address 1240 E. 22nd | | Transaction ID: C83050 |
| City Eugene | State OR | Zip Code 97403-1609 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Newood Display Fixtures | Occupation Pres. Fixture Co. | Receipt |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Jean Scheel | | Date of Receipt MM / DD / YYYY 04 / 13 / 2005 |
| Mailing Address 1929 Grand Prairie Road, SE Courtyard Village No. 20 | | Transaction ID: C82465 |
| City Albany | State OR | Zip Code 97321-5523 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer Information Requested | Occupation Retired | Receipt |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 200.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) | 550.00 |
| 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 12 / 28 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 12 |
| | | <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)
John Schleining

Mailing Address 3140 Juanipero Way Ste 201

City State Zip Code
Medford OR 97504-8647

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 ▼ 1000.00

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

Transaction ID: C82939

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Leone Timm

Mailing Address 5432 70th Avenue, S. E.

City State Zip Code
Salem OR 97301-9102

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

Name of Employer Information Requested Occupation Information Requested
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 0 5

Transaction ID: C82725

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Mark Wendt

Mailing Address 3102 Front St

City State Zip Code
Klamath Falls OR 97601-0010

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

Name of Employer Information Requested Occupation Information Requested
Builder

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: C82625

Amount of Each Receipt this Period
250.00

Receipt

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1450.00 |
| 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 13 / 28 | |
| | (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)
James Young

Mailing Address PO Box 39

City State Zip Code
Lebanon OR 97355

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

Name of Employer Occupation
Entek President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 0 | 5 | / | 2 | 0 | 0 | 5 |

Transaction ID: C82594

Amount of Each Receipt this Period
250.00

Receipt

| | | |
|--|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 250.00 |
| TOTAL This Period (last page this line number only) | ▶ | 10050.00 |

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 14 / 28

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Direct Mail Systems, Inc | | Transaction ID: E11499 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 5 |
| Mailing Address 12450 Automobile Boulevard | | Amount of Each Disbursement this Period 1200.00 |
| City Clearwater State FL Zip Code 34622- | Purpose of Disbursement DIRECT MAIL 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) ▼ | DIRECT MAIL |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Direct Mail Systems, Inc | | Transaction ID: E11500 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 5 |
| Mailing Address 12450 Automobile Boulevard | | Amount of Each Disbursement this Period 500.00 |
| City Clearwater State FL Zip Code 34622- | Purpose of Disbursement DIRECT MAIL CONSULTING FEE 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) ▼ | DIRECT MAIL CONSULTING FEE |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. FL&S | | Transaction ID: E11547 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 5 |
| Mailing Address 7320 N Dreamy Draw Dr | | Amount of Each Disbursement this Period 2061.10 |
| City Phoenix State AZ Zip Code 85020-5212 | Purpose of Disbursement TELEMARKETING 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) ▼ | TELEMARKETING |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3761.10 |
| 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)

PAGE 15 / 28

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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. Willabys Catering | | Transaction ID: E11544 | |
| Mailing Address 8800 Enchanted Way | | Date of Disbursement 04 / 14 / 2005 | |
| City Salem | State OR | Zip Code 97302- | Amount of Each Disbursement this Period 934.96 |
| Purpose of Disbursement FOOD FOR PARTY EVENT | | Category/ Type FOOD FOR PARTY EVENT | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) | 934.96 |
| TOTAL This Period (last page this line number only) | 4696.06 |

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 16 / 28

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

| | | |
|--|-------------|--|
| A. Full Name (Last, First, Middle Initial) Leisha Adams | | Transaction ID: E11478 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 5 |
| Mailing Address 300 S Everest Rd Unit 39 | | Amount of Each Disbursement this Period 548.37 |
| City Newberg State OR Zip Code 97132-2171 | FEA PAYROLL | |
| 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) ▼ |

| | | |
|--|-------------|--|
| B. Full Name (Last, First, Middle Initial) Leisha Adams | | Transaction ID: E11479 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 5 |
| Mailing Address 300 S Everest Rd Unit 39 | | Amount of Each Disbursement this Period 546.39 |
| City Newberg State OR Zip Code 97132-2171 | FEA PAYROLL | |
| 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) ▼ |

| | | |
|--|-------------|--|
| C. Full Name (Last, First, Middle Initial) Michelle Ashenfelter | | Transaction ID: E11482 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 5 |
| Mailing Address 2012 NE 15th | | Amount of Each Disbursement this Period 1541.88 |
| City Portland State OR Zip Code 97212- | FEA PAYROLL | |
| 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) ▼ |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2636.64 |
| 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 17 / 28

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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. Michelle Ashenfelter | | Transaction ID: E11483 Date of Disbursement 04 / 15 / 2005 |
| Mailing Address 2012 NE 15th | | Amount of Each Disbursement this Period 1541.88 |
| City Portland State OR Zip Code 97212- | 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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | | |
|---|-------------------|---|
| Full Name (Last, First, Middle Initial) B. Key bank | | Transaction ID: E11472 Date of Disbursement 04 / 01 / 2005 |
| Mailing Address 1500 Edgewater St NW | | Amount of Each Disbursement this Period 1994.04 |
| City Salem State OR Zip Code 97304- | 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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | | |
|---|-------------------|---|
| Full Name (Last, First, Middle Initial) C. Key bank | | Transaction ID: E11473 Date of Disbursement 04 / 15 / 2005 |
| Mailing Address 1500 Edgewater St NW | | Amount of Each Disbursement this Period 1979.54 |
| City Salem State OR Zip Code 97304- | 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 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 5515.46 |
| 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 18 / 28

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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: E11486 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 5 |
| Mailing Address 2830 Foxhaven Dr S | | Amount of Each Disbursement this Period 2046.95 |
| City Salem State OR Zip Code 97306- | Purpose of Disbursement FEA PAYROLL 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) ▼ | FEA PAYROLL |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Amy Langdon | | Transaction ID: E11488 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 5 |
| Mailing Address 2830 Foxhaven Dr S | | Amount of Each Disbursement this Period 2046.95 |
| City Salem State OR Zip Code 97306- | Purpose of Disbursement FEA PAYROLL 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) ▼ | FEA PAYROLL |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Oregon Department of Revenue | | Transaction ID: E11493 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 5 |
| Mailing Address PO Box 14800 | | Amount of Each Disbursement this Period 507.00 |
| City Salem State OR Zip Code 97309- | Purpose of Disbursement FEA PAYROLL TAXES 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) ▼ | FEA PAYROLL TAXES |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4600.90 |
| 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 19 / 28

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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: E11494 Date of Disbursement |
| Mailing Address PO Box 14800 | | <input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2005"/> |
| City Salem | State OR | Zip Code 97309- |
| Purpose of Disbursement FEA PAYROLL TAXES | <input type="text"/> | Amount of Each Disbursement this Period <input type="text" value="506.00"/> |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | FEA PAYROLL TAXES |
| State: District: | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Oregon Department of Revenue | | Transaction ID: E11554 Date of Disbursement |
| Mailing Address PO Box 14800 | | <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2005"/> |
| City Salem | State OR | Zip Code 97309- |
| Purpose of Disbursement FEA: PAYROLL TAXES | <input type="text"/> | Amount of Each Disbursement this Period <input type="text" value="1417.10"/> |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | FEA: PAYROLL TAXES |
| State: District: | | |

| | |
|--|---------------------------------------|
| SUBTOTAL of Disbursements This Page (optional) | <input type="text" value="1923.10"/> |
| TOTAL This Period (last page this line number only) | <input type="text" value="14676.10"/> |

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 International Aristotle | Nature of Debt (Purpose): Tech support |
| Mailing Address 205 Pennsylvania Ave SE | |
| City State ZIP Code Washington DC 20003- | |

| | | |
|--|---------------------------------|--|
| Outstanding Balance Beginning This Period 1950.00 | Transaction ID: 8LSE7385 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1950.00 |

| | |
|---|--|
| B. 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 7512.50 | Transaction ID: 1LSE11547 | |
| Amount Incurred This Period 1403.00 | Payment This Period 2061.10 | Outstanding Balance at Close of This Period 6854.40 |

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

| | | |
|---|----------------------------------|--|
| Outstanding Balance Beginning This Period 500.00 | Transaction ID: 9LSE11499 | |
| Amount Incurred This Period 4854.78 | Payment This Period 1700.00 | Outstanding Balance at Close of This Period 3654.78 |

| | | |
|--|---|----------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 12459.18 |
| 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) | PAGE 21 / 28 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
Oregon Republican Party

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fair Oregon State Fair | Nature of Debt (Purpose): State fair booth rental |
| Mailing Address 2330 17th St NE | |
| City State ZIP Code Salem OR 97310- | |

| | | |
|---|----------------------------------|---|
| Outstanding Balance Beginning This Period 0.00 | Transaction ID: 5LSE11561 | |
| Amount Incurred This Period 855.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 855.00 |

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

| | | |
|---|-----------------------------------|---|
| Outstanding Balance Beginning This Period 0.00 | Transaction ID: 12LSE11560 | |
| Amount Incurred This Period 637.82 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 637.82 |

| | |
|---|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor X5 Solutions | Nature of Debt (Purpose): Phone bill |
| Mailing Address 1520 4th Ave #500 | |
| City State ZIP Code Seattle WA 98101- | |

| | | |
|---|-----------------------------------|---|
| Outstanding Balance Beginning This Period 0.00 | Transaction ID: 11LSE11562 | |
| Amount Incurred This Period 167.06 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 167.06 |

| | | |
|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 1659.88 |
| 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 Willabys Catering | Nature of Debt (Purpose): Food for party event |
| Mailing Address 8800 Enchanted Way | |
| City State ZIP Code Salem OR 97302- | |

| | | |
|---|----------------------------------|---|
| Outstanding Balance Beginning This Period 934.96 | Transaction ID: 4LSE11544 | |
| Amount Incurred This Period 0.00 | Payment This Period 934.96 | Outstanding Balance at Close of This Period 0.00 |

| | |
|---|---|
| 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 0.00 | Transaction ID: 10LSE11559 | |
| Amount Incurred This Period 173.35 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 173.35 |

| | |
|---|--------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Stafford Studios | Nature of Debt (Purpose): Website |
| Mailing Address 11594 SE Meadowgold Place | |
| City State ZIP Code Clackamas OR 97015- | |

| | | |
|---|-----------------------------------|---|
| Outstanding Balance Beginning This Period 0.00 | Transaction ID: 13LSE11563 | |
| Amount Incurred This Period 300.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 300.00 |

| | | |
|--|---|--------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 473.35 |
| 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 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 67180.90 | Transaction ID: 15LSE11336 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 67180.90 |

| | |
|---|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Connolly & Goldian | Nature of Debt (Purpose): Legal fees |
| Mailing Address PO Box 3095 | |
| City State ZIP Code Salem OR 97302- | |

| | | |
|--|----------------------------------|--|
| Outstanding Balance Beginning This Period 1112.50 | Transaction ID: 6LSE11533 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1112.50 |

| | |
|---|---|
| C. 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 State ZIP Code Seattle WA 98124-1988 | |

| | | |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period 0.00 | Transaction ID: LSE11558 | |
| Amount Incurred This Period 598.98 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 598.98 |

| | | |
|--|---|----------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 68892.38 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | 83484.79 |
| 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) DH & Associates | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 1083 | | | Allocated Activity or Event Year-To-Date 53004.18 | | |
| City Salem | State OR | Zip Code 97308- | Date MM / DD / YYYY 04 / 01 / 2005 | | |
| Purpose of Disbursement: Accounting services | | | Transaction ID: H4E11513 | | |
| Activity or Event Identifier: ADMINISTRATION B 41 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 375.00 | | 2125.00 | | 2500.00 |

| | | | | | |
|--|-------------|--------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Amy Langdon | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 2830 Foxhaven Dr S | | | Allocated Activity or Event Year-To-Date 54490.96 | | |
| City Salem | State OR | Zip Code 97306- | Date MM / DD / YYYY 04 / 06 / 2005 | | |
| Purpose of Disbursement: Ex reim: cell bills | | | Transaction ID: H4E11487 | | |
| Activity or Event Identifier: ADMINISTRATION B 41 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 223.02 | | 1263.76 | | 1486.78 |

| | | | | | |
|---|-------------|------------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Certified Property | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 269 | | | Allocated Activity or Event Year-To-Date 60190.96 | | |
| City Salem | State OR | Zip Code 97308-0269 | Date MM / DD / YYYY 04 / 06 / 2005 | | |
| Purpose of Disbursement: office rent - April | | | Transaction ID: H4E11542 | | |
| Activity or Event Identifier: ADMINISTRATION B 41 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| 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 |
| 1453.02 | | 8233.76 | | 9686.78 |

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

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

| | | | | | |
|--|-------------------|--|---|--|--|
| A. Full Name (Last, First, Middle Initial) June Hartley | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 2643 3149 Shay Way | | | Allocated Activity or Event Year-To-Date [60340.96] | | |
| City State Zip Code Nyssa OR 97913-0643 | Category/ Type | | Date M M / D D / Y Y Y Y [04 / 14 / 2005] | | |
| Purpose of Disbursement: Reim for travel | | | Transaction ID: H4E11545 | | |
| Activity or Event Identifier: ADMINISTRATION B 41 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| [22.50] | | [127.50] | | [150.00] |

| | | | | | |
|--|-------------------|--|---|--|--|
| B. Full Name (Last, First, Middle Initial) Solomon Yue | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 265 50th Ave NW | | | Allocated Activity or Event Year-To-Date [61106.47] | | |
| City State Zip Code Salem OR 97304-3221 | Category/ Type | | Date M M / D D / Y Y Y Y [04 / 14 / 2005] | | |
| Purpose of Disbursement: Ex reim: travel for Natl Conv | | | Transaction ID: H4E11546 | | |
| Activity or Event Identifier: ADMINISTRATION B 41 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| [114.83] | | [650.68] | | [765.51] |

| | | | | | |
|--|-------------------|--|---|--|--|
| C. Full Name (Last, First, Middle Initial) Eschelon Teleco (Advanced Telecom) | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 34988 | | | Allocated Activity or Event Year-To-Date [61703.37] | | |
| City State Zip Code Seattle WA 98124-1988 | Category/ Type | | Date M M / D D / Y Y Y Y [04 / 14 / 2005] | | |
| Purpose of Disbursement: phone bill - March | | | Transaction ID: H4E11543 | | |
| Activity or Event Identifier: ADMINISTRATION B 41 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| [89.54] | | [507.36] | | [596.90] |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| [226.87] | | [1285.54] | | [1512.41] |

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

| | | |
|--------------------------|--------------------------|--------------------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| [] | [] | [] |

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

| | | | | | |
|--|-------------|------------------------|---|--|--|
| A. Full Name (Last, First, Middle Initial) Inc. Pacific NW Telco | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 400 SW Sixth Avenue Suite 500 | | | Allocated Activity or Event Year-To-Date 61913.37 | | |
| City Portland | State OR | Zip Code 97204-1605 | Date MM / DD / YYYY 04 / 21 / 2005 | | |
| Purpose of Disbursement: Phone service | | | Transaction ID: H4E11556 | | |
| Activity or Event Identifier: ADMINISTRATION B 41 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 31.50 | | 178.50 | | 210.00 |

| | | | | | |
|--|-------------|--------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Amy Langdon | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 2830 Foxhaven Dr S | | | Allocated Activity or Event Year-To-Date 61956.62 | | |
| City Salem | State OR | Zip Code 97306- | Date MM / DD / YYYY 04 / 22 / 2005 | | |
| Purpose of Disbursement: Reim for travel | | | Transaction ID: H4E11553 | | |
| Activity or Event Identifier: ADMINISTRATION B 41 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 6.49 | | 36.76 | | 43.25 |

| | | | | | |
|---|-------------|--------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Key bank | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 1500 Edgewater St NW | | | Allocated Activity or Event Year-To-Date 62131.44 | | |
| City Salem | State OR | Zip Code 97304- | Date MM / DD / YYYY 04 / 27 / 2005 | | |
| Purpose of Disbursement: Bank fees | | | Transaction ID: H4E11552 | | |
| Activity or Event Identifier: ADMINISTRATION B 41 | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 26.22 | | 148.60 | | 174.82 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 64.21 | | 363.86 | | 428.07 |

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

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

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

Mailing Address
PO Box 269

City State Zip Code
Salem OR 97308-0269

Purpose of Disbursement:
office rent - May

Activity or Event Identifier:
ADMINISTRATION B 41

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

67831.44

Date 04 / 27 / 2005

Transaction ID: H4E11550

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 855.00 | | 4845.00 | | 5700.00 |

B. Full Name (Last, First, Middle Initial)
Cleveland Renaissance Clevela

Mailing Address
24 Public Square

City State Zip Code
Cleveland OH 44113-

Purpose of Disbursement:
Staff lodging

Activity or Event Identifier:
ADMINISTRATION B 41

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

68375.07

Date 04 / 30 / 2005

Transaction ID: H4E11555

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 81.54 | | 462.09 | | 543.63 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 936.54 | | 5307.09 | | 6243.63 |

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 |
|---------------|------------------|--------------|
| 2680.64 | 15190.25 | 17870.89 |