

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

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 ▲ ZIP CODE ▲

C 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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

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

- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 07 / 01 / 2015 through [MM] / [DD] / [YYYY] 12 / 31 / 2015

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 F. Stephen Michels

Signature of Treasurer F. Stephen Michels [Electronically Filed] Date 01 / 28 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Holding Onto Oregon's Priorities

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="122150.02"/>	<input type="text" value="122150.02"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="196957.30"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="180000.00"/>	<input type="text" value="477928.34"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="376957.30"/>	<input type="text" value="600078.36"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="231855.07"/>	<input type="text" value="454976.13"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="145102.23"/>	<input type="text" value="145102.23"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Holding Onto Oregon's Priorities

Report Covering the Period: From: 07 / 01 / 2015 To: 12 / 31 / 2015

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).....	21000.00	43250.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	21000.00	43250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	127750.00	303378.34
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	148750.00	346628.34
12. Transfers From Affiliated/Other Party Committees.....	31250.00	131300.00
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 Transfers (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))..... ▶	180000.00	477928.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	180000.00	477928.34

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) Allocated 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	113355.07	226476.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	113355.07	226476.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	117500.00	227500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	1000.00	1000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	231855.07	454976.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	231855.07	454976.13

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	148750.00	346628.34
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	148750.00	346628.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	113355.07	226476.13
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	113355.07	226476.13

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

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

FOR LINE NUMBER: PAGE 6 OF 65
(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

Full Name (Last, First, Middle Initial)
A. ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2015
Transaction ID : SA11AI.8479

Amount of Each Receipt this Period
500.00

Total earmarked through conduit; PAC limit not affected

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
8250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2015
Transaction ID : SA11AI.8426

Amount of Each Receipt this Period
500.00

Total earmarked through conduit; PAC limit not affected

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
8750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 05 / 2015
Transaction ID : SA11AI.8423

Amount of Each Receipt this Period
500.00

Total earmarked through conduit; PAC limit not affected

[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: (check only one)	PAGE 7 OF 65
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

A. Marc Brinkmeyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1085 Hornby Creek Road
 City Sandpoint State ID Zip Code 83864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Idaho Forest Group Occupation Chariman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2015
Transaction ID : SA11AI.8293
 Amount of Each Receipt this Period
 2500.00

B. Cherokee Nation
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 948
 City Tahlequah State OK Zip Code 74465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2015
Transaction ID : SA11AI.8485
 Amount of Each Receipt this Period
 2000.00

C. Joshua Lamel
 Full Name (Last, First, Middle Initial)
 Mailing Address 5510 Trent Street
 City Chevy Chase State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BGR Group Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2015
Transaction ID : SA11AI.8480
 Amount of Each Receipt this Period
 500.00

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: (check only one)	PAGE 8 OF 65
	<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)
Holding Onto Oregon's Priorities

A. Joshua Lamel
Full Name (Last, First, Middle Initial)

Mailing Address 5510 Trent Street

City Chevy Chase State MD Zip Code 20815

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

Name of Employer BGR Group Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
08 / 05 / 2015
Transaction ID : SA11AI.8425

Amount of Each Receipt this Period
500.00

B. Joshua Lamel
Full Name (Last, First, Middle Initial)

Mailing Address 5510 Trent Street

City Chevy Chase State MD Zip Code 20815

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

Name of Employer BGR Group Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
09 / 05 / 2015
Transaction ID : SA11AI.8422

Amount of Each Receipt this Period
500.00

C. Sean O'Hollaren
Full Name (Last, First, Middle Initial)

Mailing Address 5050 SW Hilltop Lane

City Portland State OR Zip Code 97221

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

Name of Employer Nike Occupation Sr. VP, Government & Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
12 / 21 / 2015
Transaction ID : SA11AI.8306

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00

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

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

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

FOR LINE NUMBER: PAGE 9 OF 65
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)
A. Michael Peterson

Mailing Address 712 Fifth Avenue

City New York	State NY	Zip Code 10019
------------------	-------------	-------------------

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

Name of Employer Peter G. Peterson Foundation	Occupation Vice Chairman
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2015

Transaction ID : SA11AI.8308

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. Peter Peterson

Mailing Address 712 Fifth Avenue

City New York	State NY	Zip Code 10019
------------------	-------------	-------------------

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

Name of Employer Peter G. Peterson Foundation	Occupation Chairman
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2015

Transaction ID : SA11AI.8310

Amount of Each Receipt this Period
5000.00

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	21000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 65
<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

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

Full Name (Last, First, Middle Initial)
A. ABBOTT LABORATORIES EMPLOYEE POLITICAL ACTION COMMITTEE

Mailing Address 100 ABBOTT PARK RD.
D312 AP6D-2

City ABBOTT PARK State IL Zip Code 60064

FEC ID number of contributing federal political committee. **C** C00040279

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
08 / 12 / 2015
Transaction ID : SA11C.8301

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. ABBVIE POLITICAL ACTION COMMITTEE

Mailing Address 1 N. WAUKEGAN ROAD

City NORTH CHICAGO State IL Zip Code 60064

FEC ID number of contributing federal political committee. **C** C00536573

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
11 / 03 / 2015
Transaction ID : SA11C.8316

Amount of Each Receipt this Period
4000.00

Full Name (Last, First, Middle Initial)
C. Accenture PAC

Mailing Address 800 Connecticut Avenue NW
Suite 600

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00300707

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
08 / 12 / 2015
Transaction ID : SA11C.8303

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....▶	11500.00
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: (check only one)	PAGE 11 OF 65
<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

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

Full Name (Last, First, Middle Initial)
A. AFLAC PAC

Mailing Address **WORLDWIDE HEADQUARTERS**
1932 WYNNNTON ROAD

City **COLUMBUS** State **GA** Zip Code **31999**

FEC ID number of contributing federal political committee. **C C00034157**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
09 / 14 / 2015

Transaction ID : SA11C.8304

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address **1111 14TH STREET, NW**
SUITE 1100

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00000729**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
12 / 21 / 2015

Transaction ID : SA11C.8312

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. AMERICAN SOCIETY OF PENSION PROFESSIONALS & ACTUARIES NTSAA PAC

Mailing Address **4245 N FAIRFAX DRIVE**
SUITE 750

City **ARLINGTON** State **VA** Zip Code **22203**

FEC ID number of contributing federal political committee. **C C00515049**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
07 / 13 / 2015

Transaction ID : SA11C.8502

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
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: (check only one)	PAGE 12 OF 65
<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

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

A. AMERISOURCEBERGEN CORPORATION POLITICAL ACTION COMMITTEE (ABC PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 1300 MORRIS DRIVE
 SUITE 100
 City CHESTERBROOK State PA Zip Code 19355
 FEC ID number of contributing federal political committee. **C** C00400929
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2015
Transaction ID : SA11C.8329
 Amount of Each Receipt this Period
 2250.00

B. BLUE SHIELD OF CALIFORNIA
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 BEALE STREET
 17-C356
 City SAN FRANCISCO State CA Zip Code 94105
 FEC ID number of contributing federal political committee. **C** C00340364
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2015
Transaction ID : SA11C.8324
 Amount of Each Receipt this Period
 2500.00

C. CAMBIA HEALTH SOLUTIONS INC. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 SW MARKET ST
 PO BOX 1271/MS E12C
 City PORTLAND State OR Zip Code 97207
 FEC ID number of contributing federal political committee. **C** C00252684
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2015
Transaction ID : SA11C.8313
 Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional).....▶	7250.00
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: (check only one)	PAGE 13 OF 65
<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

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

A. Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

Mailing Address 8400 Westpark Drive

City McLean State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11C.8319

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
DELOITTE POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 365

City WASHINGTON State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 11 / 2015

Transaction ID : SA11C.8290

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
EDWARDS LIFESCIENCES POLITICAL ACTION COMMITTEE (EWPAC)

Mailing Address ONE EDWARDS WAY

City IRVINE State CA Zip Code 92614

FEC ID number of contributing federal political committee. **C** C00411900

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 17 / 2015

Transaction ID : SA11C.8288

Amount of Each Receipt this Period
 2000.00

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
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: (check only one)	PAGE 14 OF 65
<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

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

Full Name (Last, First, Middle Initial)
A. ESOP ASSOCIATION PAC

Mailing Address 1726 M STREET, NW SUITE 501

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00196089

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2015

Transaction ID : SA11C.8314

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. FEDERATION OF AMERICAN HOSPITALS PAC

Mailing Address 750 9TH STREET NW SUITE 600

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00002261

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	17	/	2015

Transaction ID : SA11C.8428

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)

Mailing Address 1299 PENNSYLVANIA AVE NW SUITE 900

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2015

Transaction ID : SA11C.8291

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
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: (check only one)	PAGE 15 OF 65
<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

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

A. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 Constitution Ave. NW
 Suite 500 West
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C** C00096156
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2015
Transaction ID : SA11C.8282
 Amount of Each Receipt this Period
 4000.00

B. HUMANA INC. POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 975 F STREET, NW
 SUITE 550
 City WASHINGTON State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C** C00271007
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2015
Transaction ID : SA11C.8285
 Amount of Each Receipt this Period
 2500.00

C. HUMANA INC. POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 975 F STREET, NW
 SUITE 550
 City WASHINGTON State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C** C00271007
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2015
Transaction ID : SA11C.8292
 Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional).....	9000.00
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: (check only one)	PAGE 16 OF 65
<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

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

Full Name (Last, First, Middle Initial)
A. INDEPENDENCE BLUE CROSS PAC (IBC PAC)

Mailing Address 1901 MARKET STREET

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00450056

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : SA11C.8321

Amount of Each Receipt this Period
 1250.00

Full Name (Last, First, Middle Initial)
B. INDEPENDENCE BLUE CROSS PAC (IBC PAC)

Mailing Address 1901 MARKET STREET

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00450056

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : SA11C.8323

Amount of Each Receipt this Period
 1250.00

Full Name (Last, First, Middle Initial)
C. INTEL CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 1634 I Street N.W.
Suite 300

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00125641

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2015

Transaction ID : SA11C.8287

Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
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: (check only one)	PAGE 17 OF 65
<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

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

Full Name (Last, First, Middle Initial)
A. KINDRED HEALTHCARE INC. POLITICAL ACTION COMMITTEE

Mailing Address 680 South Fourth Avenue
ONE VENCOR PLACE

City Louisville State KY Zip Code 40202

FEC ID number of contributing federal political committee. **C** C00242271

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
09 / 28 / 2015
Transaction ID : SA11C.8483

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 16011 NE 36TH WAY
BOX 97017

City REDMOND State WA Zip Code 98073

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
09 / 30 / 2015
Transaction ID : SA11C.8484

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. NATIONAL ASSOCIATION OF HOME BUILDERS

Mailing Address 1201 15TH ST NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C30001366

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
09 / 24 / 2015
Transaction ID : SA11C.8482

Amount of Each Receipt this Period
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: (check only one)	PAGE 18 OF 65
<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

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

A. NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1101 KING STREET
SUITE 600

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
12 / 30 / 2015
Transaction ID : SA11C.8318

Amount of Each Receipt this Period
5000.00

B. NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1850 M STREET, NW
SUITE 540

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
12 / 17 / 2015
Transaction ID : SA11C.8333

Amount of Each Receipt this Period
5000.00

C. NIKE INC FEDERAL POLITICAL ACTION COMMITTEE (NIKE FEDERAL PAC)

Full Name (Last, First, Middle Initial)
Mailing Address ONE BOWERMAN DRIVE

City BEAVERTON State OR Zip Code 97005

FEC ID number of contributing federal political committee. **C** C00142786

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
12 / 17 / 2015
Transaction ID : SA11C.8320

Amount of Each Receipt this Period
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: (check only one)	PAGE 19 OF 65
<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

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

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

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

City New York State NY Zip Code 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 ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 29 / 2015

Transaction ID : SA11C.8317

Amount of Each Receipt this Period
2000.00

Full Name (Last, First, Middle Initial)
B. PACIFICORP - PACIFIC POWER/ROCKY MOUNTAIN POWER PAC

Mailing Address 825 N E MULTNOMAH SUITE 2000 LCT

City PORTLAND State OR Zip Code 97232

FEC ID number of contributing federal political committee. **C** C00082800

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 13 / 2015

Transaction ID : SA11C.8477

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. SELECT MEDICAL CORPORATION PAC

Mailing Address 4714 GETTYSBURG ROAD
ATTN: GENERAL COUNSEL

City MECHANICSBURG State PA Zip Code 17055

FEC ID number of contributing federal political committee. **C** C00546119

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 24 / 2015

Transaction ID : SA11C.8280

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
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: (check only one)	PAGE 20 OF 65
<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

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

A. SEMPRA ENERGY EMPLOYEES POLITICAL ACTION COMMITTEE- FEDERAL

Full Name (Last, First, Middle Initial)
Mailing Address 488 8TH AVE.

City SAN DIEGO	State CA	Zip Code 92101
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00008748

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12	/	15	/	2015

Transaction ID : SA11C.8326

Amount of Each Receipt this Period
5000.00

B. THE KRAFT HEINZ COMPANY POLITICAL ACTION COMMITTEE (HEINZPAC)

Full Name (Last, First, Middle Initial)
Mailing Address 1 PPG PLACE, SUITE 3100

City PITTSBURGH	State PA	Zip Code 15222
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00336040

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08	/	11	/	2015

Transaction ID : SA11C.8503

Amount of Each Receipt this Period
1000.00

C. THE KRAFT HEINZ COMPANY POLITICAL ACTION COMMITTEE (HEINZPAC)

Full Name (Last, First, Middle Initial)
Mailing Address 1 PPG PLACE, SUITE 3100

City PITTSBURGH	State PA	Zip Code 15222
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00336040

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08	/	11	/	2015

Transaction ID : SA11C.8505

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
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: (check only one)	PAGE 21 OF 65
<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

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

Full Name (Last, First, Middle Initial)
A. UNITED PARCEL SERVICE INC. PAC

Mailing Address 55 Glenlake Parkway NE

City Atlanta State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C C00064766**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 21 / 2015
Transaction ID : SA11C.8305

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA EMPLOYEE PAC

Mailing Address 9800 FREDERICKSBURG ROAD

City SAN ANTONIO State TX Zip Code 78288

FEC ID number of contributing federal political committee. **C C00164145**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 12 / 2015
Transaction ID : SA11C.8299

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
C. VERIZON WIRELESS/VERIZON COMM INC PAC

Mailing Address 'VERIZON WIRELESS PAC'
180 WASHINGTON VALLEY ROAD

City BEDMINSTER State NJ Zip Code 07921

FEC ID number of contributing federal political committee. **C C00363127**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 17 / 2015
Transaction ID : SA11C.8328

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
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 22 OF 65
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2015

Transaction ID : SA11C.8302

Amount of Each Receipt this Period
5000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	127750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 65
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. WYDEN FOR OREGON
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 3271
 City PORTLAND State OR Zip Code 97208
 FEC ID number of contributing federal political committee. **C** C00436998
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 122550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2015
Transaction ID : SA12.8429
 Amount of Each Receipt this Period
 22500.00
 Transfer

B. Harvey Platt
 Full Name (Last, First, Middle Initial)
 Mailing Address 4343 SW Greenleaf Drive
 City Portland State OR Zip Code 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 ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2015
Transaction ID : SA12.8429.0
 Amount of Each Receipt this Period
 1100.00
 09/30/15 Wyden for Oregon Transfer
[MEMO ITEM]

C. Richard Edelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 11532 SW Military Road
 City Portland State OR Zip Code 97219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 27 / 2015
Transaction ID : SA12.8429.1
 Amount of Each Receipt this Period
 4400.00
 09/30/15 Wyden for Oregon Transfer
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	22500.00
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: (check only one)	PAGE 24 OF 65
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Leslie Alexander
 Full Name (Last, First, Middle Initial)
 Mailing Address 384 Barons Lane
 City Southampton State NY Zip Code 11968
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Houston Rockets Organization Occupation Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **08 / 11 / 2015**
Transaction ID : SA12.8429.2
 Amount of Each Receipt this Period **5000.00**
 09/30/15 Wyden for Oregon Transfer
[MEMO ITEM]

B. Kent Thiry
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Cantitoe Lane
 City Englewood State CO Zip Code 80113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Davita Occupation Chairman & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2350.00**

Date of Receipt **08 / 14 / 2015**
Transaction ID : SA12.8429.3
 Amount of Each Receipt this Period **2350.00**
 09/30/15 Wyden for Oregon Transfer
[MEMO ITEM]

c. Phillip Fogg Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 27737 SW Petes Mountain Road
 City West Linn State OR Zip Code 97068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Marquis Companies, Inc. Occupation President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **08 / 19 / 2015**
Transaction ID : SA12.8429.4
 Amount of Each Receipt this Period **400.00**
 09/30/15 Wyden for Oregon Transfer
[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: (check only one)	PAGE 25 OF 65
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. Angela Fogg

Mailing Address 27737 SW Petes Mountain Road

City West Linn	State OR	Zip Code 97068
-------------------	-------------	-------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	19	/	2015

Transaction ID : SA12.8429.5

Amount of Each Receipt this Period
5000.00

09/30/15 Wyden for Oregon Transfer

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. Eric Paulson

Mailing Address 195 W. Kensington

City Astoria	State OR	Zip Code 97103
-----------------	-------------	-------------------

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

Name of Employer Lektro	Occupation CEO
----------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2015

Transaction ID : SA12.8429.6

Amount of Each Receipt this Period
4600.00

09/30/15 Wyden for Oregon Transfer

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. Jeff Heatherington

Mailing Address 6206 NE Cleveland Avenue

City Portland	State OR	Zip Code 97211
------------------	-------------	-------------------

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

Name of Employer FamilyCare, Inc.	Occupation President
--------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : SA12.8429.7

Amount of Each Receipt this Period
4600.00

09/30/15 Wyden for Oregon Transfer

[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: (check only one)	PAGE 26 OF 65
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. WD EB5G RiverPlace LLC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1308 NW Everett Street
 City Portland State OR Zip Code 97209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **08 / 07 / 2015**
Transaction ID : SA12.8429.8
 Amount of Each Receipt this Period **1000.00**
 09/30/15 Wyden for Oregon Transfer
[MEMO ITEM]

B. Rick Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 1850 North Shore Road
 City Lake Oswego State OR Zip Code 97034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Rogue Venture Partners Co- Founder
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **09 / 30 / 2015**
Transaction ID : SA12.8429.9
 Amount of Each Receipt this Period **5000.00**
 In-Kind Catering
[MEMO ITEM]

C. Erika Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 1850 North Shore Road
 City Lake Oswego State OR Zip Code 97034
 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 **5000.00**

Date of Receipt **09 / 30 / 2015**
Transaction ID : SA12.8429.10
 Amount of Each Receipt this Period **5000.00**
 In-Kind Catering
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA12

Transaction ID : SA12.8429.8

WD EB5G RiverPlace LLC contribution is split between two partners. Deirdre Dowling Dame \$500 1308 NW Everett Street Portland, OR 97209 Self Employed/ Real Estate and Carol Williams \$500 1308 NW Everett Street Portland, OR 97209 Self Employed/Real Estate

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 65
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. WYDEN FOR OREGON
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 3271

City PORTLAND	State OR	Zip Code 97208
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00436998

Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 131300.00

Date of Receipt
12 / 31 / 2015
Transaction ID : SA12.8430

Amount of Each Receipt this Period
8750.00

Transfer

B. Gordon Keane
Full Name (Last, First, Middle Initial)
Mailing Address 5903 SE 14th Avenue

City Portland	State OR	Zip Code 97202
------------------	-------------	-------------------

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

Name of Employer Digital Vision Inc.	Occupation President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
10 / 31 / 2015
Transaction ID : SA12.8430.0

Amount of Each Receipt this Period
3000.00

12/31/15 Wyden for Oregon Transfer

[MEMO ITEM]

C. Georges St. Laurent Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 120 NE 136th Avenue Suite 200

City Vancouver	State WA	Zip Code 98684
-------------------	-------------	-------------------

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

Name of Employer St. Laurent Properties	Occupation Owner
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4600.00

Date of Receipt
11 / 10 / 2015
Transaction ID : SA12.8430.1

Amount of Each Receipt this Period
4600.00

12/31/15 Wyden for Oregon Transfer

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	8750.00
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: (check only one)	PAGE 29 OF 65
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Marilyn Brett
Full Name (Last, First, Middle Initial)

Mailing Address 10000 SE Main Street
Suite 360

City Portland State OR Zip Code 97216

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

Name of Employer Not Employed Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 15 / 2015
Transaction ID : SA12.8430.2

Amount of Each Receipt this Period 1100.00

12/31/15 Wyden for Oregon Transfer

[MEMO ITEM]

B. Harold Goldstein
Full Name (Last, First, Middle Initial)

Mailing Address 11744 SW Summerville Avenue

City Portland State OR Zip Code 97219

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

Name of Employer OPAD Consulting Occupation Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt 12 / 22 / 2015
Transaction ID : SA12.8430.3

Amount of Each Receipt this Period 100.00

12/31/15 Wyden for Oregon Transfer

[MEMO ITEM]

C. Mr. Joseph Angel
Full Name (Last, First, Middle Initial)

Mailing Address 1507 NW 24th Avenue

City Portland State OR Zip Code 97210

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

Name of Employer Pacific Star Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4600.00

Date of Receipt 11 / 30 / 2015
Transaction ID : SA12.8430.4

Amount of Each Receipt this Period 4600.00

12/31/15 Wyden for Oregon Transfer

[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: (check only one)	PAGE 30 OF 65
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Darrell Brett
Full Name (Last, First, Middle Initial)

Mailing Address 10000 SE Main Street
Suite 360

City Portland State OR Zip Code 97216

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

Name of Employer Self Occupation Surgeon

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1700.00

Date of Receipt
11 / 06 / 2015
Transaction ID : SA12.8430.5

Amount of Each Receipt this Period
1700.00

12/31/15 Wyden for Oregon Transfer

[MEMO ITEM]

B. Darrell Brett
Full Name (Last, First, Middle Initial)

Mailing Address 10000 SE Main Street
Suite 360

City Portland State OR Zip Code 97216

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

Name of Employer Self Occupation Surgeon

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2800.00

Date of Receipt
11 / 15 / 2015
Transaction ID : SA12.8430.6

Amount of Each Receipt this Period
1100.00

12/31/15 Wyden for Oregon Transfer

[MEMO ITEM]

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	31250.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8481

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ActBlue

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8427

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. ActBlue

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8424

Amount of Each Disbursement this Period

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)

<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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Taxes

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8409

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8410

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Processing

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8411

Amount of Each Disbursement this Period

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)

<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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukee State OR Zip Code 97222

Purpose of Disbursement
Payroll Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 30 / 2015

Transaction ID : SB21B.8412

Amount of Each Disbursement this Period

21.71

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukee State OR Zip Code 97222

Purpose of Disbursement
Payroll Taxes

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : SB21B.8415

Amount of Each Disbursement this Period

1272.82

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukee State OR Zip Code 97222

Purpose of Disbursement
Payroll Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : SB21B.8416

Amount of Each Disbursement this Period

32.20

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

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

1326.73

**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

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

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukee State OR Zip Code 97222

Purpose of Disbursement
Payroll Processing

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : SB21B.8417

Amount of Each Disbursement this Period

133.18

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukee State OR Zip Code 97222

Purpose of Disbursement
Payroll Taxes

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2015

Transaction ID : SB21B.8420

Amount of Each Disbursement this Period

1272.82

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukee State OR Zip Code 97222

Purpose of Disbursement
Payroll Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2015

Transaction ID : SB21B.8421

Amount of Each Disbursement this Period

32.20

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

1438.20

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2015

Transaction ID : SB21B.8498

Amount of Each Disbursement this Period

133.18

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Taxes

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2015

Transaction ID : SB21B.8487

Amount of Each Disbursement this Period

1272.82

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2015

Transaction ID : SB21B.8488

Amount of Each Disbursement this Period

32.20

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

1438.20

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2015

Transaction ID : SB21B.8490

Amount of Each Disbursement this Period

21.71

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Taxes

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2015

Transaction ID : SB21B.8492

Amount of Each Disbursement this Period

1272.82

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2015

Transaction ID : SB21B.8494

Amount of Each Disbursement this Period

105.00

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

1399.53

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
1	2	3		4	5	6		7	8	9	0	1	2

Transaction ID : SB21B.8495

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0	
												1	7	.	2	5					

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Taxes

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
1	2	3		4	5	6		7	8	9	0	1	2

Transaction ID : SB21B.8496

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0	
												2	4	0	.	4	5				

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
1	2	3		4	5	6		7	8	9	0	1	2

Transaction ID : SB21B.8497

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0	
												3	0	.	1	0					

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

1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0	
												2	4	5	.	2	5				

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

1	2	3	4	5	6	7	8	9	0	.	1	2	3	4	5	6	7	8	9	0	
												2	4	5	.	2	5				

**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

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

Full Name (Last, First, Middle Initial)

A. AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE

Date of Disbursement

Mailing Address 1891 PRESTON WHITE DRIVE

M M M	/	D D D	/	Y Y Y Y Y
12		10		2015

City RESTON State VA Zip Code 20191

Transaction ID : SB21B.8369

Purpose of Disbursement
Campaign Event Expenses

003

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

3250.00

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. AT&T Mobility

Date of Disbursement

Mailing Address PO Box 536216

M M M	/	D D D	/	Y Y Y Y Y
07		07		2015

City Atlanta State GA Zip Code 30353-6216

Transaction ID : SB21B.8407

Purpose of Disbursement
Telephone Service

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

132.54

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. AT&T Mobility

Date of Disbursement

Mailing Address PO Box 536216

M M M	/	D D D	/	Y Y Y Y Y
08		03		2015

City Atlanta State GA Zip Code 30353-6216

Transaction ID : SB21B.8413

Purpose of Disbursement
Telephone Service

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

132.52

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

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

3515.06

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

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**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

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

Full Name (Last, First, Middle Initial)

A. AT&T Mobility

Mailing Address PO Box 536216

City Atlanta State GA Zip Code 30353-6216

Purpose of Disbursement
Telephone Service

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.8418

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. AT&T Mobility

Mailing Address PO Box 536216

City Atlanta State GA Zip Code 30353-6216

Purpose of Disbursement
Telephone Service

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.8499

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. AT&T Mobility

Mailing Address PO Box 536216

City Atlanta State GA Zip Code 30353-6216

Purpose of Disbursement
Telephone Service

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.8491

Amount of Each Disbursement this Period

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)

<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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. AT&T Mobility

Mailing Address PO Box 536216

City Atlanta State GA Zip Code 30353-6216

Purpose of Disbursement
Telephone Service

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.8493

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address PO Box 53132

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Payment

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.8408

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. The Nines Departure Lounge

Mailing Address 525 SW Morrison Street

City Portland State OR Zip Code 97204

Purpose of Disbursement
Catering

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.8408.0

Amount of Each Disbursement this Period

[MEMO ITEM]

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

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.8408

Sum of the memo items exceeds payment amount due to overpayments to the Visa card in June.

Form/Schedule:

Transaction ID:

**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

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

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 323 SE Martin Luther King Blvd

City Portland State OR Zip Code 97214

Purpose of Disbursement
Office Supplies

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	9			2	0	1	5		

Transaction ID : SB21B.8408.2

Amount of Each Disbursement this Period

8	4	.	9	9
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Eco Shuttle

Mailing Address 25500 SW Grahams Ferry Road

City Sherwood State OR Zip Code 97140

Purpose of Disbursement
Transportation

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	9			2	0	1	5		

Transaction ID : SB21B.8408.3

Amount of Each Disbursement this Period

2	1	1	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Martin's Gorge Tours

Mailing Address PO Box 18177

City Portland State OR Zip Code 97218

Purpose of Disbursement
Event Expenses

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	9			2	0	1	5		

Transaction ID : SB21B.8408.4

Amount of Each Disbursement this Period

6	9	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

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

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

0	0	0
---	---	---

0	0	0
---	---	---

**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

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

Full Name (Last, First, Middle Initial)

A. Carroll Travel

Mailing Address 201 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Agent Fee

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8408.5

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Delta Air

Mailing Address PO Box 20980

City Atlanta State GA Zip Code 30320

Purpose of Disbursement Airfare

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8408.6

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Carroll Travel

Mailing Address 201 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Agent Fee

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8408.7

Amount of Each Disbursement this Period

[MEMO ITEM]

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)

<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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. Carroll Travel

Mailing Address 201 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Agent Fee

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8408.8

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Alaska Air

Mailing Address PO Box 24948

City Seattle State WA Zip Code 98124

Purpose of Disbursement Airfare

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8408.9

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Carroll Travel

Mailing Address 201 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Agent Fee

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8408.10

Amount of Each Disbursement this Period

[MEMO ITEM]

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)

<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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. Carroll Travel

Mailing Address 201 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel Expenses

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8408.12

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. The Picnic House

Mailing Address 723 SW Salmon Street

City Portland State OR Zip Code 97205

Purpose of Disbursement
Catering

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8408.13

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Flying Elephants

Mailing Address 115 NW 22nd Ave

City Portland State OR Zip Code 97210

Purpose of Disbursement
Catering

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8408.15

Amount of Each Disbursement this Period

[MEMO ITEM]

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)

<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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. Alaska Air

Mailing Address PO Box 24948

City State Zip Code
Seattle WA 98124

Purpose of Disbursement
Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8408.16

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Alaska Air

Mailing Address PO Box 24948

City State Zip Code
Seattle WA 98124

Purpose of Disbursement
Airfare

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8408.17

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address PO Box 53132

City State Zip Code
Phoenix AZ 85072

Purpose of Disbursement
Credit Card Payment

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8414

Amount of Each Disbursement this Period

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)

<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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address PO Box 53132

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Bank Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8414.0

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. The Nines Departure Lounge

Mailing Address 525 SW Morrison Street

City Portland State OR Zip Code 97204

Purpose of Disbursement
Catering

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8414.1

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address PO Box 53132

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Payment

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8419

Amount of Each Disbursement this Period

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)

<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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address PO Box 53132

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement Fees

001

Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2015

Transaction ID : SB21B.8419.0

Amount of Each Disbursement this Period

68.40

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Alaska Air

Mailing Address PO Box 24948

City Seattle State WA Zip Code 98124

Purpose of Disbursement Airfare

002

Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2015

Transaction ID : SB21B.8419.1

Amount of Each Disbursement this Period

181.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address PO Box 53132

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement Credit Card Payment

001

Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2015

Transaction ID : SB21B.8471

Amount of Each Disbursement this Period

281.00

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

281.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. Grape Escape Winery Tour

Mailing Address 77 NE Holland St

City Portland State OR Zip Code 97211

Purpose of Disbursement
Event Expenses

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B.8471.1**

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address PO Box 53132

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Payment

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B.8468**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Eco Shuttle

Mailing Address 25500 SW Grahams Ferry Road

City Sherwood State OR Zip Code 97140

Purpose of Disbursement
Transportation

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B.8468.0**

Amount of Each Disbursement this Period

[MEMO ITEM]

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)

<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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. Blue Heron Consulting LLC

Mailing Address PO Box 284

City Annandale State VA Zip Code 22003

Purpose of Disbursement Strategy/Communications

001

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2015

Transaction ID : SB21B.8344

Amount of Each Disbursement this Period

12000.00

Full Name (Last, First, Middle Initial)

B. Blue Heron Consulting LLC

Mailing Address PO Box 284

City Annandale State VA Zip Code 22003

Purpose of Disbursement Strategy/Communications

001

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2015

Transaction ID : SB21B.8359

Amount of Each Disbursement this Period

12000.00

Full Name (Last, First, Middle Initial)

C. Tim Leahy

Mailing Address 7423 N Huron Avenue

City Portland State OR Zip Code 97203

Purpose of Disbursement Salary

001

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2015

Transaction ID : SB21B.8393

Amount of Each Disbursement this Period

2313.46

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

26313.46

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)

<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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. Tim Leahy

Mailing Address 7423 N Huron Avenue

City Portland State OR Zip Code 97203

Purpose of Disbursement
Salary

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8394

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Tim Leahy

Mailing Address 7423 N Huron Avenue

City Portland State OR Zip Code 97203

Purpose of Disbursement
Salary

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8395

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Tim Leahy

Mailing Address 7423 N Huron Avenue

City Portland State OR Zip Code 97203

Purpose of Disbursement
Salary

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8396

Amount of Each Disbursement this Period

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)

<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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. Tim Leahy

Mailing Address 7423 N Huron Avenue

City Portland State OR Zip Code 97203

Purpose of Disbursement
Salary

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8397

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Tim Leahy

Mailing Address 7423 N Huron Avenue

City Portland State OR Zip Code 97203

Purpose of Disbursement
Salary

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8398

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. NGP Software, Inc.

Mailing Address 1101 Vermont Avenue, NW
Suite 710

City Washington State DC Zip Code 20005

Purpose of Disbursement
Database

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8341

Amount of Each Disbursement this Period

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)

<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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. NGP Software, Inc.

Mailing Address 1101 Vermont Avenue, NW
Suite 710

City Washington State DC Zip Code 20005

Purpose of Disbursement

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 27 / 2015

Transaction ID : **SB21B.8362**

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. Skyline Farm

Mailing Address 2601 NW Vaughn Street

City Portland State OR Zip Code 97210

Purpose of Disbursement
Catering

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2015

Transaction ID : **SB21B.8339**

Amount of Each Disbursement this Period

12091.00

Full Name (Last, First, Middle Initial)

C. The Ashmead Group

Mailing Address 909 New Jersey Avenue SE
Suite 1018

City Washington State DC Zip Code 20003

Purpose of Disbursement

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2015

Transaction ID : **SB21B.8338**

Amount of Each Disbursement this Period

5000.00

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

17391.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. The Ashmead Group

Mailing Address 909 New Jersey Avenue SE
Suite 1018

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising Consultant

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.8343

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. The Ashmead Group

Mailing Address 909 New Jersey Avenue SE
Suite 1018

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising Consultant

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.8360

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. The Ashmead Group

Mailing Address 909 New Jersey Avenue SE
Suite 1018

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising Consultant

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.8361

Amount of Each Disbursement this Period

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)

<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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. The Ashmead Group

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2015

Mailing Address 909 New Jersey Avenue SE
Suite 1018

Transaction ID : SB21B.8363

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

1,390.11

Purpose of Disbursement
Fundraising Consultant

003
Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. The Ashmead Group

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2015

Mailing Address 909 New Jersey Avenue SE
Suite 1018

Transaction ID : SB21B.8364

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

5,000.00

Purpose of Disbursement
Fundraising Consultant

003
Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. The Ashmead Group

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		17		2015

Mailing Address 909 New Jersey Avenue SE
Suite 1018

Transaction ID : SB21B.8375

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

5,000.00

Purpose of Disbursement
Fundraising Consultant

003
Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

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

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

11,390.11

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**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

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

Full Name (Last, First, Middle Initial)

A. The Bus Project

Mailing Address 333 SE 2nd Ave

City Portland State OR Zip Code 97214

Purpose of Disbursement
Event Tickets

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			17			2015			

Transaction ID : SB21B.8365

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Jocelyn Tyree

Mailing Address 8935 SW Bellflower Street

City Tigard State OR Zip Code 97224

Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
07			31			2015			

Transaction ID : SB21B.8399

Amount of Each Disbursement this Period

808.78

Full Name (Last, First, Middle Initial)

C. Jocelyn Tyree

Mailing Address 8935 SW Bellflower Street

City Tigard State OR Zip Code 97224

Purpose of Disbursement
Salary

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
08			31			2015			

Transaction ID : SB21B.8400

Amount of Each Disbursement this Period

808.78

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

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

2617.56

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**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

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

Full Name (Last, First, Middle Initial)

A. Jocelyn Tyree

Mailing Address 8935 SW Bellflower Street

City Tigard State OR Zip Code 97224

Purpose of Disbursement
Salary

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8401

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Jocelyn Tyree

Mailing Address 8935 SW Bellflower Street

City Tigard State OR Zip Code 97224

Purpose of Disbursement
Salary

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8402

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Jocelyn Tyree

Mailing Address 8935 SW Bellflower Street

City Tigard State OR Zip Code 97224

Purpose of Disbursement
Salary

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.8403

Amount of Each Disbursement this Period

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)

<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)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. Jocelyn Tyree

Mailing Address 8935 SW Bellflower Street

City Tigard State OR Zip Code 97224

Purpose of Disbursement
Salary

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SB21B.8406

Amount of Each Disbursement this Period

808.78

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

808.78

113289.07

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. BARON HILL FOR INDIANA

Mailing Address PO BOX 30675

City INDIANAPOLIS State IN Zip Code 46230

Purpose of Disbursement

011

Category/
Type

Candidate Name

BARON P HILL

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IN District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2015

Transaction ID : SB23.8388

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. CATHERINE CORTEZ MASTO FOR SENATE

Mailing Address 8020 SOUTH RAINBOW BLVD #100-112

City LAS VEGAS State NV Zip Code 89139

Purpose of Disbursement

011

Category/
Type

Candidate Name

CATHERINE CORTEZ MASTO

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NV District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 29 / 2015

Transaction ID : SB23.8356

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. CATHERINE CORTEZ MASTO FOR SENATE

Mailing Address 8020 SOUTH RAINBOW BLVD #100-112

City LAS VEGAS State NV Zip Code 89139

Purpose of Disbursement

011

Category/
Type

Candidate Name

CATHERINE CORTEZ MASTO

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NV District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : SB23.8382

Amount of Each Disbursement this Period

5000.00

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

12500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE

Mailing Address 120 MARYLAND AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2015

Transaction ID : SB23.8373

Amount of Each Disbursement this Period

45000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF PATRICK MURPHY

Mailing Address 4521 PGA BLVD #412

City PALM BEACH GARDENS State FL Zip Code 33418

Purpose of Disbursement

Candidate Name

Patrick Murphy

Office Sought: House Senate President
State: FL District: 00

Disbursement For: 2016 Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2015

Transaction ID : SB23.8348

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City NEW YORK State NY Zip Code 10185

Purpose of Disbursement

Candidate Name

HILLARY RODHAM CLINTON

Office Sought: House Senate President
State: District: 00

Disbursement For: 2016 Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2015

Transaction ID : SB23.8334

Amount of Each Disbursement this Period

5000.00

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

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

55000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City PHILADELPHIA State PA Zip Code 19110

Purpose of Disbursement

011

Category/
Type

Candidate Name

KATHLEEN ALANA MCGINTY

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : **SB23.8379**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address PO BOX 298

City CONCORD State NH Zip Code 03302

Purpose of Disbursement

011

Category/
Type

Candidate Name

MARGARET WOOD HASSAN

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NH District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : **SB23.8376**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. MISSOURIANS FOR KANDER

Mailing Address PO BOX 548

City COLUMBIA State MO Zip Code 65205

Purpose of Disbursement

011

Category/
Type

Candidate Name

JASON KANDER

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MO District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : **SB23.8350**

Amount of Each Disbursement this Period

5000.00

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

15000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. MISSOURIANS FOR KANDER

Mailing Address PO BOX 548

City COLUMBIA State MO Zip Code 65205

Purpose of Disbursement

011

Candidate Name
JASON KANDER

Category/
Type

Office Sought: House
 Senate
 President
State: MO District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : **SB23.8383**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. RUSS FOR WISCONSIN

Mailing Address PO BOX 620061

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement

011

Candidate Name
RUSSELL DANA FEINGOLD

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : **SB23.8384**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. RUSS FOR WISCONSIN

Mailing Address PO BOX 620061

City MIDDLETON State WI Zip Code 53562

Purpose of Disbursement

011

Candidate Name
RUSSELL DANA FEINGOLD

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2015

Transaction ID : **SB23.8387**

Amount of Each Disbursement this Period

5000.00

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

15000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. STRICKLAND FOR SENATE

Mailing Address PO BOX 2196

City COLUMBUS State OH Zip Code 43216

Purpose of Disbursement

011

Candidate Name
TED STRICKLAND

Category/
Type

Office Sought: House
 Senate
 President
State: OH District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	5

Transaction ID : SB23.8345

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. STRICKLAND FOR SENATE

Mailing Address PO BOX 2196

City COLUMBUS State OH Zip Code 43216

Purpose of Disbursement

011

Candidate Name
TED STRICKLAND

Category/
Type

Office Sought: House
 Senate
 President
State: OH District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	5

Transaction ID : SB23.8349

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address PO BOX 10793

City CHICAGO State IL Zip Code 60610

Purpose of Disbursement

011

Candidate Name
L TAMMY DUCKWORTH

Category/
Type

Office Sought: House
 Senate
 President
State: IL District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	5

Transaction ID : SB23.8353

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. WASHINGTON STATE DEMOCRATIC CENTRAL COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2015

Mailing Address P O BOX 4027

Transaction ID : SB23.8507

City State Zip Code
SEATTLE WA 98194

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement

011
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

5000.00

117500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Democratic Party of Lane County

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		03		2015

Mailing Address

City Eugene State OR Zip Code

Transaction ID : SB29.8368

Purpose of Disbursement

011
Category/Type

Amount of Each Disbursement this Period

1000.00

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

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)..... ▶

1000.00

1000.00
