

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO Box 25406
 Check if different than previously reported. (ACC)
Portland OR 97298

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

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On: 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 (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2010 through 01 31 2010

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

Type or Print Name of Treasurer Dennis Morgan

Signature of Treasurer Electronically Filed by Dennis Morgan Date 03 01 2010

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

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

A. Form/Schedule : **F3XA**

Transaction ID :

Memo #1: Please note on line 11(c) receipt of \$20,000 from Oregonians Against Job Killing taxes was transferred to the party's non-federal account on 1/7/10 on as noted on line 22. Memo #2: Please note on line 12 the \$18,230 transfer from the Republican National Committee was an in kind transfer for telephone equipment; please see the correlated in-kind expenditure on line 21(b). Memo #3: Please note on line 22 that the \$20,000 transfer was a redesignation of the receipt from Oregonians Against Job Killing Taxes, see Memo #1, and the two transfers totaling \$60,000 to the party's non-federal account were for cash flow purposes only. No non-federal expenditures were made to influence the election or defeat of any specific federal candidates, nor has the non-federal account paid any expenditure that should have been allocated. Memo #4: Please note on schedule D the negative amount incurred for Comcast Cable represents a correction for an expense attributable to the party's non-federal account.

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		41685.18
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	41685.18									
(c) Total Receipts (from Line 19)	162471.05	162471.05								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	204156.23	204156.23								
7. Total Disbursements (from Line 31)	144522.65	144522.65								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	59633.58	59633.58								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	123789.01									

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**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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)	26050.00	26050.00
(ii) Unitemized	23191.05	23191.05
(iii) TOTAL (add Lines 11(a)(i) and (ii)	49241.05	49241.05
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	20000.00	20000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	69241.05	69241.05
12. Transfers From Affiliated/Other Party Committees	93230.00	93230.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	162471.05	162471.05
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	162471.05	162471.05

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	3531.45	3531.45
(ii) Non-Federal Share.....	13284.99	13284.99
(b) Other Federal Operating Expenditures.....	28642.61	28642.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	45459.05	45459.05
22. Transfers to Affiliated/Other Party Committees.....	80000.00	80000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	19063.60	19063.60
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	19063.60	19063.60
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	144522.65	144522.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	131237.66	131237.66

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	69241.05	69241.05
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	69241.05	69241.05
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	32174.06	32174.06
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	32174.06	32174.06

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL1

NAME OF COMMITTEE (In Full) Oregon Republican Party
NAME OF ACCOUNT KEY LEVIN

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... <small>(Use Schedule L-A)</small>	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... <small>(Add Lines 1c and 2)</small>	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT <small>(Use Schedule L-B)</small>		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	0.00
6. TOTAL DISBURSEMENTS..... <small>(Add Lines 4e and 5)</small>	0.00	0.00
7. BEGINNING CASH ON HAND..... <small>(for Column B, use cash as of January 1st)</small>	78.00	78.00
8. RECEIPTS..... <small>(from Line 3)</small>	0.00	0.00
9. SUBTOTAL..... <small>(Add Lines 7 and 8)</small>	78.00	78.00
10. DISBURSEMENTS..... <small>(From Line 6)</small>	0.00	0.00
11. ENDING CASH ON HAND..... <small>(Subtract Line 10 From Line 9)</small>	78.00	78.00

**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 8 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Broughton Bishop

Mailing Address PO Box 3030

City Portland State OR Zip Code 97208

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

Name of Employer Pendleton Woolen Mills Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 26 / 2010

Transaction ID: 00216.C108268

Amount of Each Receipt this Period 5000.00

Receipt

B.

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

Mailing Address 6825 SW Raleighwood Ln

City Portland State OR Zip Code 97225-1924

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 26 / 2010

Transaction ID: 00216.C108142

Amount of Each Receipt this Period 250.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Noel Flynn

Mailing Address 1361 Country Commons Ln

City Lake Oswego State OR Zip Code 97034

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 25 / 2010

Transaction ID: 00130.C108093

Amount of Each Receipt this Period 500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 5750.00

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 9 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Kelly Hale	Date of Receipt MM / DD / YYYY 01 / 25 / 2010
	Mailing Address 1124 SW Myrtle Drive	Transaction ID: 00130.C108112
	City State Zip Code Portland OR 97201	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation RB Dain Rauscher Investment Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Robert Hale	Date of Receipt MM / DD / YYYY 01 / 28 / 2010
	Mailing Address 33935 Riverview Dr	Transaction ID: 00216.C108483
	City State Zip Code Hermiston OR 97838	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Self Farmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Lester Hawkins	Date of Receipt MM / DD / YYYY 01 / 08 / 2010
	Mailing Address 4473 SE Aldercrest Rd	Transaction ID: 00122.C107904
	City State Zip Code Milwaukie OR 97222-4774	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Oregon Decorative Rock Inc Business Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	1750.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Lester Hawkins		Date of Receipt
	Mailing Address 4473 SE Aldercrest Rd		<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Milwaukie	OR	97222-4774
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Oregon Decorative Rock Inc		Occupation Business Owner	Transaction ID: 00216.C108423
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>	<input type="text" value="250.00"/>
Receipt			

B.	Full Name (Last, First, Middle Initial) Michael Kehoe		Date of Receipt
	Mailing Address PO Box 428		<input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Lake Oswego	OR	97034-0428
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self		Occupation Businessman	Transaction ID: 00130.C108110
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>	<input type="text" value="500.00"/>
Receipt			

C.	Full Name (Last, First, Middle Initial) Kenneth Kirn		Date of Receipt
	Mailing Address 13615,SE Rivercrest Drive		<input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Vancouver	WA	98683-6677
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Columbia Cascade Co.		Occupation CEO	Transaction ID: 00130.C108109
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>	<input type="text" value="500.00"/>
Receipt			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1250.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 11 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Norman Kralman
Mailing Address 52151 Fruitvale Rd
City Milton Freewater State OR Zip Code 97862
FEC ID number of contributing federal political committee. **C**
Name of Employer Kralman Steel Structures Occupation Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 01 / 29 / 2010
Transaction ID: 00216.C108492
Amount of Each Receipt this Period 250.00
Receipt

B. Full Name (Last, First, Middle Initial)
Robert Levy
Mailing Address 822 Highway 395 #423
City Hermiston State OR Zip Code 97838
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Rancher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00
Date of Receipt 01 / 22 / 2010
Transaction ID: 00122.C107921
Amount of Each Receipt this Period 1500.00
Receipt

C. Full Name (Last, First, Middle Initial)
Joseph Micallef
Mailing Address 22233 Antioch Downs Ct
City Tualatin State OR Zip Code 97062
FEC ID number of contributing federal political committee. **C**
Name of Employer Allegro Media Group Occupation CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 01 / 23 / 2010
Transaction ID: 00130.C108119
Amount of Each Receipt this Period 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 2750.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 54
(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)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Robert Neighbor

Mailing Address 2130 SW Jefferson St Ste 315

City Portland State OR Zip Code 97201-7711

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

Name of Employer RW Neighbor and Co. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 01 / 06 / 2010

Transaction ID: 00121.C107752

Amount of Each Receipt this Period 400.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Loren Parks

Mailing Address PO Box 5669

City Beaverton State OR Zip Code 97006

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

Name of Employer Parks Medical Electronics Inc Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 01 / 28 / 2010

Transaction ID: 00216.C108484

Amount of Each Receipt this Period 4000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Chester Prior

Mailing Address 32327 Oregon Trail Rd

City Echo State OR Zip Code 97826-9001

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

Name of Employer Eagle Ranch Occupation Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 26 / 2010

Transaction ID: 00216.C108127

Amount of Each Receipt this Period 1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **5400.00**

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 / 54
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Marcia Randall	Date of Receipt MM / DD / YYYY 01 / 28 / 2010
	Mailing Address 5735 SW Grover Court	Transaction ID: 00216.C108488
	City State Zip Code Portland OR 97221-1303	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Homemaker Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Ruppert Reinstadler	Date of Receipt MM / DD / YYYY 01 / 25 / 2010
	Mailing Address 14550 SW Hazeltree Terrace	Transaction ID: 00130.C108111
	City State Zip Code Portland OR 97224	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Self Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Henry Ritz	Date of Receipt MM / DD / YYYY 01 / 25 / 2010
	Mailing Address 21580 SW Stafford Rd	Transaction ID: 00130.C108108
	City State Zip Code Tualatin OR 97062	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	6500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 54
(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
							17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial) Ede Schmidt		Date of Receipt MM / DD / YYYY 01 / 28 / 2010
Mailing Address 1237 Lake Front Rd		Transaction ID: 00216.C108485
City Lake Oswego	State OR	Zip Code 97034
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	

B.

Full Name (Last, First, Middle Initial) Ede Schmidt		Date of Receipt MM / DD / YYYY 01 / 28 / 2010
Mailing Address 1237 Lake Front Rd		Transaction ID: 00216.C108367
City Lake Oswego	State OR	Zip Code 97034
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.

Full Name (Last, First, Middle Initial) Donald Spear		Date of Receipt MM / DD / YYYY 01 / 26 / 2010
Mailing Address 3450 SW Cascade Terrace		Transaction ID: 00216.C108269
City West Linn	State OR	Zip Code 97068
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Blue Tech, LLC	Occupation Executive	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1400.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 15 / 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Todd Stucky

Mailing Address 2228 SW 21st Avenue

City State Zip Code
Portland OR 97201

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

Name of Employer The Todd Organization Occupation Executive

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

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

Transaction ID: 00216.C108522

Amount of Each Receipt this Period
1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
John Vanderford

Mailing Address 7 Grouse Ter

City State Zip Code
Lake Oswego OR 97035

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

Name of Employer Self Occupation Consultant

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	1	/	2	0	1	0

Transaction ID: 00122.C108024

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	26050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 16 / 54	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Oregonians Against Job Killing Taxes		Date of Receipt																					
	Mailing Address PO Box 12682		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	4		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	1		0	4		2	0	1	0														
	City State Zip Code Salem OR 97309-0682		Transaction ID: 00119.C107711																					
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20000.00																					
Name of Employer Occupation		Receipt																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 20000.00																						

SUBTOTAL of Receipts This Page (optional)	▶	20000.00
TOTAL This Period (last page this line number only)	▶	20000.00

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

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

FOR LINE NUMBER: PAGE 17 / 54
(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)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Republican National Committee

Mailing Address 310 First St SE

City State Zip Code
Washington DC 20003-

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 75000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 1 / 1 9 / 2 0 1 0

Transaction ID: 00217.C108852

Amount of Each Receipt this Period
75000.00

Transfers From Affil./Auth.

B. Full Name (Last, First, Middle Initial)
Republican National Committee

Mailing Address 310 First St SE

City State Zip Code
Washington DC 20003-

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 93230.00

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

Transaction ID: 00217.C108853

Amount of Each Receipt this Period
18230.00

Transfers From Affil./Auth.

SUBTOTAL of Receipts This Page (optional)	▶	93230.00
TOTAL This Period (last page this line number only)	▶	93230.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 54

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 297813 City Fort Lauderdale State FL Zip Code 33329- Purpose of Disbursement Credit Card Fees Candidate Name	Transaction ID: 00217.E18144 Date of Disbursement 01 / 05 / 2010
	Amount of Each Disbursement this Period 17.79 Category/Type CREDIT CARD FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 297813 City Fort Lauderdale State FL Zip Code 33329- Purpose of Disbursement Credit Card Fees Candidate Name	Transaction ID: 00217.E18145 Date of Disbursement 01 / 19 / 2010
	Amount of Each Disbursement this Period 220.98 Category/Type CREDIT CARD FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) CTS Holdings LLC Mailing Address c/o Key Bank 1500 Edgewater St NW City Salem State OR Zip Code 97304- Purpose of Disbursement Credit Card Fees Candidate Name	Transaction ID: 00217.E18126 Date of Disbursement 01 / 04 / 2010
	Amount of Each Disbursement this Period 53.06 Category/Type CREDIT CARD FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	291.83
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)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
CTS Holdings LLC

Transaction ID: 00217.E18128
Date of Disbursement

Mailing Address c/o Key Bank
1500 Edgewater St NW

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

City Salem State OR Zip Code 97304-

Amount of Each Disbursement this Period

36.74

Purpose of Disbursement
Credit Card Fees

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

CREDIT CARD FEES

State: District:

B.

Full Name (Last, First, Middle Initial)
CTS Holdings LLC

Transaction ID: 00217.E18129
Date of Disbursement

Mailing Address c/o Key Bank
1500 Edgewater St NW

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

City Salem State OR Zip Code 97304-

Amount of Each Disbursement this Period

1.46

Purpose of Disbursement
Credit Card Fees

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

CREDIT CARD FEES

State: District:

C.

Full Name (Last, First, Middle Initial)
CTS Holdings LLC

Transaction ID: 00217.E18127
Date of Disbursement

Mailing Address c/o Key Bank
1500 Edgewater St NW

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

City Salem State OR Zip Code 97304-

Amount of Each Disbursement this Period

111.63

Purpose of Disbursement
Credit Card Fees

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

CREDIT CARD FEES

State: District:

SUBTOTAL of Disbursements This Page (optional)

149.83

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)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) CTS Holdings LLC <hr/> Mailing Address c/o Key Bank 1500 Edgewater St NW <hr/> City Salem State OR Zip Code 97304- <hr/> Purpose of Disbursement Credit Card Fees Candidate Name	Transaction ID: 00217.E18130 Date of Disbursement 01 / 07 / 2010
	Amount of Each Disbursement this Period 10.00 <hr/> Category/ Type CREDIT CARD FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) CTS Holdings LLC <hr/> Mailing Address c/o Key Bank 1500 Edgewater St NW <hr/> City Salem State OR Zip Code 97304- <hr/> Purpose of Disbursement Credit Card Fees Candidate Name	Transaction ID: 00217.E18131 Date of Disbursement 01 / 08 / 2010
	Amount of Each Disbursement this Period 1.50 <hr/> Category/ Type CREDIT CARD FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) CTS Holdings LLC <hr/> Mailing Address c/o Key Bank 1500 Edgewater St NW <hr/> City Salem State OR Zip Code 97304- <hr/> Purpose of Disbursement Credit Card Fees Candidate Name	Transaction ID: 00217.E18132 Date of Disbursement 01 / 11 / 2010
	Amount of Each Disbursement this Period 120.00 <hr/> Category/ Type CREDIT CARD FEES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	131.50
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)
Oregon Republican Party

<p>A.</p> <p>Full Name (Last, First, Middle Initial) CTS Holdings LLC</p> <p>Mailing Address c/o Key Bank 1500 Edgewater St NW</p> <p>City Salem State OR Zip Code 97304-</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00217.E18134 Date of Disbursement: 01 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 1.37</p> <p>CREDIT CARD FEES</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) CTS Holdings LLC</p> <p>Mailing Address c/o Key Bank 1500 Edgewater St NW</p> <p>City Salem State OR Zip Code 97304-</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00217.E18133 Date of Disbursement: 01 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 2.43</p> <p>CREDIT CARD FEES</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) CTS Holdings LLC</p> <p>Mailing Address c/o Key Bank 1500 Edgewater St NW</p> <p>City Salem State OR Zip Code 97304-</p> <p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00217.E18136 Date of Disbursement: 01 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 8.00</p> <p>CREDIT CARD FEES</p>

SUBTOTAL of Disbursements This Page (optional) ▶

11.80

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 22 / 54

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) CTS Holdings LLC	Transaction ID: 00217.E18135 Date of Disbursement 01 / 20 / 2010
	Mailing Address c/o Key Bank 1500 Edgewater St NW	Amount of Each Disbursement this Period 10.85
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement Credit Card Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CREDIT CARD FEES

B.	Full Name (Last, First, Middle Initial) CTS Holdings LLC	Transaction ID: 00217.E18137 Date of Disbursement 01 / 21 / 2010
	Mailing Address c/o Key Bank 1500 Edgewater St NW	Amount of Each Disbursement this Period 7.21
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement Credit Card Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CREDIT CARD FEES

C.	Full Name (Last, First, Middle Initial) CTS Holdings LLC	Transaction ID: 00217.E18139 Date of Disbursement 01 / 26 / 2010
	Mailing Address c/o Key Bank 1500 Edgewater St NW	Amount of Each Disbursement this Period 14.16
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement Credit Card Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CREDIT CARD FEES

SUBTOTAL of Disbursements This Page (optional)	▶	32.22
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 54

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) CTS Holdings LLC	Transaction ID: 00217.E18140 Date of Disbursement 01 / 26 / 2010
	Mailing Address c/o Key Bank 1500 Edgewater St NW	Amount of Each Disbursement this Period 0.85
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement Credit Card Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CREDIT CARD FEES

B.	Full Name (Last, First, Middle Initial) CTS Holdings LLC	Transaction ID: 00217.E18138 Date of Disbursement 01 / 26 / 2010
	Mailing Address c/o Key Bank 1500 Edgewater St NW	Amount of Each Disbursement this Period 41.44
	City Salem State OR Zip Code 97304-	
	Purpose of Disbursement Credit Card Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CREDIT CARD FEES

C.	Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc	Transaction ID: 00217.E18160 Date of Disbursement 01 / 07 / 2010
	Mailing Address 12450 Automobile Boulevard	Amount of Each Disbursement this Period 1696.00
	City Clearwater State FL Zip Code 34622-	
	Purpose of Disbursement List Rental - OR GOP	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		LIST RENTAL - OR GOP

SUBTOTAL of Disbursements This Page (optional)	▶	1738.29
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)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
FLS Connect

Transaction ID: 00217.E18156
Date of Disbursement

Mailing Address 7320 N Dreamy Draw Dr

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

City Phoenix State AZ Zip Code 85020-5212

Amount of Each Disbursement this Period

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Category/ Type

2422.60

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

FUNDRAISING PHONE CALLS - OR GOP

State: District:

B.

Full Name (Last, First, Middle Initial)
FLS Connect

Transaction ID: 00217.E18157
Date of Disbursement

Mailing Address 7320 N Dreamy Draw Dr

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

City Phoenix State AZ Zip Code 85020-5212

Amount of Each Disbursement this Period

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Category/ Type

1150.15

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

FUNDRAISING PHONE CALLS - OR GOP

State: District:

C.

Full Name (Last, First, Middle Initial)
FLS Connect

Transaction ID: 00217.E18155
Date of Disbursement

Mailing Address 7320 N Dreamy Draw Dr

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

City Phoenix State AZ Zip Code 85020-5212

Amount of Each Disbursement this Period

Purpose of Disbursement
Fundraising Phone Calls - OR GOP

Category/ Type

3941.05

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

FUNDRAISING PHONE CALLS - OR GOP

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

7513.80

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)

PAGE 25 / 54

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Key Merchants Mailing Address 7300 Chapman Highway City Knoxville State TN Zip Code 37920- Purpose of Disbursement Credit Card Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00217.E18141 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 1 0
	Amount of Each Disbursement this Period 436.49 Category/Type CREDIT CARD FEES

B. Full Name (Last, First, Middle Initial) Key Merchants Mailing Address 7300 Chapman Highway City Knoxville State TN Zip Code 37920- Purpose of Disbursement Credit Card Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00217.E18142 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 1 0
	Amount of Each Disbursement this Period 80.75 Category/Type CREDIT CARD FEES

C. Full Name (Last, First, Middle Initial) Republican National Committee Mailing Address 310 First St SE City Washington State DC Zip Code 20003- Purpose of Disbursement See line 12 In-Kind Transfer Phones Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 00217.E18205 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 1 0
	Amount of Each Disbursement this Period 18230.00 Category/Type SEE LINE 12 IN-KIND TRANSFER PHONES

SUBTOTAL of Disbursements This Page (optional) ▶	18747.24
TOTAL This Period (last page this line number only) ▶	28616.51

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Oregon Republican Party State Account	Transaction ID: 00217.E18207 Date of Disbursement
	Mailing Address c/o Key Bank 1500 Edgewater St NW	<input type="text" value="01"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
	City Salem State OR Zip Code 97302-	Amount of Each Disbursement this Period
	Purpose of Disbursement Transfer from Federal to State	<input type="text" value="20000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Oregon Republican Party State Account	Transaction ID: 00217.E18209 Date of Disbursement
	Mailing Address c/o Key Bank 1500 Edgewater St NW	<input type="text" value="01"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City Salem State OR Zip Code 97302-	Amount of Each Disbursement this Period
	Purpose of Disbursement Transfer from Federal to State	<input type="text" value="50000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Oregon Republican Party State Account	Transaction ID: 00217.E18210 Date of Disbursement
	Mailing Address c/o Key Bank 1500 Edgewater St NW	<input type="text" value="01"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City Salem State OR Zip Code 97302-	Amount of Each Disbursement this Period
	Purpose of Disbursement Transfer from Federal to State	<input type="text" value="10000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="80000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="80000.00"/>

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Employment Trends	Transaction ID: 00217.E18159 Date of Disbursement 01 / 29 / 2010
	Mailing Address PO Box 27008	Amount of Each Disbursement this Period 3696.00
	City Salt Lake City State UT Zip Code 84127-	
	Purpose of Disbursement Voter ID Calls - OR GOP	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		VOTER ID CALLLS - OR GOP

B.	Full Name (Last, First, Middle Initial) Kevin Hoar	Transaction ID: 00217.E18197 Date of Disbursement 01 / 15 / 2010
	Mailing Address 12563 NW Millford St	Amount of Each Disbursement this Period 448.53
	City Portland State OR Zip Code 97229-9303	
	Purpose of Disbursement FEA Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

C.	Full Name (Last, First, Middle Initial) Kevin Hoar	Transaction ID: 00217.E18198 Date of Disbursement 01 / 28 / 2010
	Mailing Address 12563 NW Millford St	Amount of Each Disbursement this Period 448.53
	City Portland State OR Zip Code 97229-9303	
	Purpose of Disbursement FEA Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)	4593.06
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Internal Revenue Svc-Payroll Tax Dept.

Transaction ID: 00217.E18204
Date of Disbursement

Mailing Address c/o Key Bank 1500 Edgewater St NW

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

City Salem State OR Zip Code 97304-

Amount of Each Disbursement this Period

1612.64

Purpose of Disbursement
FEA Payroll Taxes

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

FEA PAYROLL TAXES

State: District:

B.

Full Name (Last, First, Middle Initial)
Internal Revenue Svc-Payroll Tax Dept.

Transaction ID: 00217.E18203
Date of Disbursement

Mailing Address c/o Key Bank 1500 Edgewater St NW

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

City Salem State OR Zip Code 97304-

Amount of Each Disbursement this Period

50.33

Purpose of Disbursement
FEA Payroll Taxes

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

FEA PAYROLL TAXES

State: District:

C.

Full Name (Last, First, Middle Initial)
Internal Revenue Svc-Payroll Tax Dept.

Transaction ID: 00217.E18201
Date of Disbursement

Mailing Address c/o Key Bank 1500 Edgewater St NW

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

City Salem State OR Zip Code 97304-

Amount of Each Disbursement this Period

47.67

Purpose of Disbursement
FEA Payroll Taxes

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

FEA PAYROLL TAXES

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

1710.64

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)

PAGE 29 / 54

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Internal Revenue Svc-Payroll Tax Dept.	Transaction ID: 00217.E18202 Date of Disbursement
	Mailing Address c/o Key Bank 1500 Edgewater St NW	<input type="text" value="01"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Salem State OR Zip Code 97304-	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Payroll Taxes	<input type="text" value="1612.62"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL TAXES

B.	Full Name (Last, First, Middle Initial) Julia C Miller	Transaction ID: 00217.E18195 Date of Disbursement
	Mailing Address 6574 SW Arranmore Ct	<input type="text" value="01"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Portland State OR Zip Code 97223-	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Payroll	<input type="text" value="984.15"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

C.	Full Name (Last, First, Middle Initial) Julia C Miller	Transaction ID: 00217.E18196 Date of Disbursement
	Mailing Address 6574 SW Arranmore Ct	<input type="text" value="01"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Portland State OR Zip Code 97223-	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Payroll	<input type="text" value="984.16"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

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)

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Oregon Department of Revenue	Transaction ID: 00217.E18199 Date of Disbursement
	Mailing Address P.O. Box 14800	<input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
	City Salem State OR Zip Code 97309-0920	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Payroll Taxes	<input type="text" value="636.32"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL TAXES

B.	Full Name (Last, First, Middle Initial) Oregon Department of Revenue	Transaction ID: 00217.E18200 Date of Disbursement
	Mailing Address P.O. Box 14800	<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Salem State OR Zip Code 97309-0920	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Payroll Taxes	<input type="text" value="636.31"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL TAXES

C.	Full Name (Last, First, Middle Initial) Andrew Over	Transaction ID: 00217.E18191 Date of Disbursement
	Mailing Address 1485 SW 134th Ave	<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City Beaverton State OR Zip Code 97005-0986	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Payroll	<input type="text" value="2614.95"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3887.58"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

<p>A. Full Name (Last, First, Middle Initial) Andrew Over</p> <p>Mailing Address 1485 SW 134th Ave</p> <p>City Beaverton State OR Zip Code 97005-0986</p> <p>Purpose of Disbursement FEA Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00217.E18192</p> <p>Date of Disbursement 01 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 2614.95</p> <p>FEA PAYROLL</p>
<p>B. Full Name (Last, First, Middle Initial) Regence Blue Cross Blue Shield of Oregon</p> <p>Mailing Address 100 SW Market PO Box 1271</p> <p>City Portland State OR Zip Code 97207-</p> <p>Purpose of Disbursement Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00217.E18165</p> <p>Date of Disbursement 01 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1286.40</p> <p>INSURANCE</p>
<p>C. Full Name (Last, First, Middle Initial) Paula Warren</p> <p>Mailing Address 18320 NW Chemeketa Lane #237</p> <p>City Portland State OR Zip Code 97229-</p> <p>Purpose of Disbursement FEA Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00217.E18193</p> <p>Date of Disbursement 01 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 695.02</p> <p>FEA PAYROLL</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4596.37

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Paula Warren

Mailing Address 18320 NW Chemeketa Lane #237

City State Zip Code
Portland OR 97229-

Purpose of Disbursement
FEA Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00217.E18194

Date of Disbursement

/ /

Amount of Each Disbursement this Period

695.02

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

695.02

TOTAL This Period (last page this line number only)

19063.60

SCHEDULE C (FEC Form 3X)

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

FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS90219.C93909

LOAN SOURCE Full Name (Last, First, Middle Initial)
F. Douglas Day

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 4386 Rowan Ave N

City Keizer State OR ZIP Code 97303-5824

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	1000.00	9000.00

TERMS

Date Incurred: MM DD YY YY Date Due: 20101231 Interest Rate: 8.00 % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	▶	9000.00
TOTALS This Period (last page in this line only)	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

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

FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS90219.C93964

LOAN SOURCE Full Name (Last, First, Middle Initial)
Michael Scheel

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 3951 Croisan Creek Rd S

City Salem State OR ZIP Code 97302-9474

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	1000.00	9000.00

TERMS

Date Incurred: MM DD YYYY 01 31 2008
 Date Due: 20101231
 Interest Rate: 8.00 % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	▶	9000.00
TOTALS This Period (last page in this line only)	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

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

FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS90219.C93966

LOAN SOURCE Full Name (Last, First, Middle Initial)
Donald Malarkey

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 2495 E Nob Hill St SE

City Salem State OR ZIP Code 97302-3733

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

TERMS

Date Incurred: MM DD YYYY 01 30 2008
 Date Due: 20101231
 Interest Rate: 8.00 % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional) ► 10000.00

TOTALS This Period (last page in this line only) ► []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

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

PAGE 36 / 54
FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)
Oregon Republican Party

Transaction ID: LS90219.C93965

LOAN SOURCE Full Name (Last, First, Middle Initial) Julie Scheel	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3951 Croisan Creek Rd S	
City Salem State OR ZIP Code 97302-9474	

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
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TERMS

Date Incurred MM DD YY YY 01 31 2008	Date Due 20101231	Interest Rate 8.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="10000.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text" value="38000.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

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

Outstanding Balance Beginning This Period		Transaction ID: LS00217.E18160	
4678.10			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
1696.00	1696.00	4678.10	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Office Depot			Nature of Debt (Purpose): Office Supplies
Mailing Address 10520 SW Cascade Ave			
City	State	ZIP Code	
Portland	OR	97223-4302	

Outstanding Balance Beginning This Period		Transaction ID: LS00217.E18212	
438.34			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
218.97	0.00	657.31	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pitney Bowes Purchase Power			Nature of Debt (Purpose): Postage - OR GOP
Mailing Address PO Box 856042			
City	State	ZIP Code	
Louisville	KY	40285-6042	

Outstanding Balance Beginning This Period		Transaction ID: LS00217.E18213	
2789.92			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
145.28	0.00	2935.20	

1) SUBTOTALS This Period This Page (optional).....	▶	8270.61
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T Wireless	Nature of Debt (Purpose): Phone service
Mailing Address PO Box 30459	
City State ZIP Code Los Angeles CA 90030-	

Outstanding Balance Beginning This Period 67180.90	Transaction ID: LS90219.E11336	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 67180.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Compliance Consulting Company	Nature of Debt (Purpose): Compliance Consulting
Mailing Address PO Box 365	
City State ZIP Code Mc Lean VA 22101-0365	

Outstanding Balance Beginning This Period 6000.00	Transaction ID: LS00217.E18151	
Amount Incurred This Period 0.00	Payment This Period 6000.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lori Hardwick Fundraising	Nature of Debt (Purpose): Fundraising Consulting -- OR GOP
Mailing Address PO Box 25445	
City State ZIP Code Portland OR 97298-0445	

Outstanding Balance Beginning This Period 5000.00	Transaction ID: LS00217.E18214	
Amount Incurred This Period 1000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6000.00

1) SUBTOTALS This Period This Page (optional).....	73180.90
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bradshaw Advertising			Nature of Debt (Purpose): Advertising - OR GOP
Mailing Address 811 NW 19th			
City Portland	State OR	ZIP Code 97209-	

Outstanding Balance Beginning This Period <input type="text" value="4337.50"/>		Transaction ID: LS91114.E17892	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4337.50"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Leo Company			Nature of Debt (Purpose): Communications Services - OR GOP
Mailing Address 9318 Champoeg Rd NE			
City Aurora	State OR	ZIP Code 97002-	

Outstanding Balance Beginning This Period <input type="text" value="1000.00"/>		Transaction ID: LS00217.E18153	
Amount Incurred This Period <input type="text" value="1000.00"/>	Payment This Period <input type="text" value="2000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Comcast Cable			Nature of Debt (Purpose): Internet Service - OR GOP
Mailing Address PO Box 34744			
City Seattle	State WA	ZIP Code 98124-	

Outstanding Balance Beginning This Period <input type="text" value="554.70"/>		Transaction ID: LS00217.E18215	
Amount Incurred This Period <input type="text" value="-554.70"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="4337.50"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="85789.01"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="38000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="123789.01"/>

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Complete Campaigns			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3635 Ruffin Rd Fl 3			Allocated Activity or Event Year-To-Date 2452.74		
City San Diego	State CA	Zip Code 92123-1880	Date <input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Computer Support			Transaction ID: H400217.E18121		
Activity or Event Identifier: ADMINISTRATION B 31 1					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.84		3.16		4.00

B. Full Name (Last, First, Middle Initial) Complete Campaigns			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3635 Ruffin Rd Fl 3			Allocated Activity or Event Year-To-Date 7138.02		
City San Diego	State CA	Zip Code 92123-1880	Date <input type="text" value="01"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Computer Support			Transaction ID: H400217.E18122		
Activity or Event Identifier: ADMINISTRATION B 31 1					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.42		1.58		2.00

C. Full Name (Last, First, Middle Initial) Complete Campaigns			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3635 Ruffin Rd Fl 3			Allocated Activity or Event Year-To-Date 7142.02		
City San Diego	State CA	Zip Code 92123-1880	Date <input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Computer Support			Transaction ID: H400217.E18123		
Activity or Event Identifier: ADMINISTRATION B 31 1					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.84		3.16		4.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.10		7.90		10.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Complete Campaigns			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3635 Ruffin Rd Fl 3			Allocated Activity or Event Year-To-Date 9701.22		
City San Diego	State CA	Zip Code 92123-1880	Date M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 1 0		
Purpose of Disbursement: Computer Support			Transaction ID: H400217.E18124		
Activity or Event Identifier: ADMINISTRATION B 31 1					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.52		5.73		7.25

B. Full Name (Last, First, Middle Initial) Complete Campaigns			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3635 Ruffin Rd Fl 3			Allocated Activity or Event Year-To-Date 12187.94		
City San Diego	State CA	Zip Code 92123-1880	Date M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 1 0		
Purpose of Disbursement: Computer Support			Transaction ID: H400217.E18125		
Activity or Event Identifier: ADMINISTRATION B 31 1					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.42		1.58		2.00

C. Full Name (Last, First, Middle Initial) Robert Rollinger			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1721 SW Harvey Ws			Allocated Activity or Event Year-To-Date 7136.02		
City Beaverton	State OR	Zip Code 97006-	Date M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 1 0		
Purpose of Disbursement: Website Assistance OR GOP			Transaction ID: H400217.E18146		
Activity or Event Identifier: ADMINISTRATION B 31 1					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
107.58		404.71		512.29

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.52		412.02		521.54

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Robert Rollinger			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1721 SW Harvey Ws			Allocated Activity or Event Year-To-Date 11170.71	
City Beaverton	State OR	Zip Code 97006-	Date M M / D D / Y Y Y Y 0 1 / 2 6 / 2 0 1 0	
Purpose of Disbursement: Website Assistance OR GOP			Transaction ID: H400217.E18147	
Activity or Event Identifier: ADMINISTRATION B 31 1				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
308.59		1160.90		1469.49

B. Full Name (Last, First, Middle Initial) Associated Business Systems			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7440 SW Bonita Rd			Allocated Activity or Event Year-To-Date 15816.44	
City Portland	State OR	Zip Code 97224-8028	Date M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 1 0	
Purpose of Disbursement: Printer Supplies - OR GOP			Transaction ID: H400217.E18148	
Activity or Event Identifier: ADMINISTRATION B 31 1				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
103.71		390.15		493.86

C. Full Name (Last, First, Middle Initial) Aristotle International			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 205 Pennsylvania Ave SE			Allocated Activity or Event Year-To-Date 986.11	
City Washington	State DC	Zip Code 20003-1182	Date M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 1 0	
Purpose of Disbursement: Computer Support			Transaction ID: H400217.E18149	
Activity or Event Identifier: ADMINISTRATION B 31 1				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
464.80		1748.55		2213.35

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Aristotle International			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 205 Pennsylvania Ave SE			Allocated Activity or Event Year-To-Date 1236.11		
City Washington	State DC	Zip Code 20003-1182	Date MM / DD / YYYY 01 / 15 / 2010		
Purpose of Disbursement: Computer Support			Transaction ID: H400217.E18150		
Activity or Event Identifier: ADMINISTRATION B 31 1					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

B. Full Name (Last, First, Middle Initial) Compliance Consulting Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 365			Allocated Activity or Event Year-To-Date 5452.74		
City Mc Lean	State VA	Zip Code 22101-0365	Date MM / DD / YYYY 01 / 15 / 2010		
Purpose of Disbursement: Compliance Consulting			Transaction ID: H400217.E18151		
Activity or Event Identifier: ADMINISTRATION B 31 1					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
630.00		2370.00		3000.00

C. Full Name (Last, First, Middle Initial) Dell Financial			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 120001			Allocated Activity or Event Year-To-Date 1365.41		
City Dallas	State TX	Zip Code 75312-	Date MM / DD / YYYY 01 / 15 / 2010		
Purpose of Disbursement: Equipment Lease			Transaction ID: H400217.E18152		
Activity or Event Identifier: ADMINISTRATION B 31 1					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.15		102.15		129.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
709.65		2669.65		3379.30

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) The Leo Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 9318 Champoeg Rd NE			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">6452.74</div>	
City	State	Zip Code	Category/ Type	
Aurora	OR	97002-		
Purpose of Disbursement: Communications Services - OR GOP				
Activity or Event Identifier: ADMINISTRATION B 31 1			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">01 / 15 / 2010</div> Transaction ID: H400217.E18153	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

B. Full Name (Last, First, Middle Initial) The Leo Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 9318 Champoeg Rd NE			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">16816.44</div>	
City	State	Zip Code	Category/ Type	
Aurora	OR	97002-		
Purpose of Disbursement: Communications Services - OR GOP				
Activity or Event Identifier: ADMINISTRATION B 31 1			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">01 / 29 / 2010</div> Transaction ID: H400217.E18154	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

C. Full Name (Last, First, Middle Initial) Compliance Consulting Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 365			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">15187.94</div>	
City	State	Zip Code	Category/ Type	
Mc Lean	VA	22101-0365		
Purpose of Disbursement: Compliance Consulting				
Activity or Event Identifier: ADMINISTRATION B 31 1			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">01 / 29 / 2010</div> Transaction ID: H400217.E18158	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
630.00		2370.00		3000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) U.S. Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Tigard or Main Branch			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">656.98</div>	
City Tigard	State OR	Zip Code 97223-	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">01 / 07 / 2010</div>	
Purpose of Disbursement: Postage -- OR GOP			Category/ Type <div style="border: 1px solid black; width: 100%; height: 15px;"></div>	
Activity or Event Identifier: ADMINISTRATION B 31 1			Transaction ID: H400217.E18161	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

B. Full Name (Last, First, Middle Initial) GE Capital			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 31001-0273			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">6623.73</div>	
City Pasadena	State CA	Zip Code 91110-	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">01 / 15 / 2010</div>	
Purpose of Disbursement: Equipment Lease			Category/ Type <div style="border: 1px solid black; width: 100%; height: 15px;"></div>	
Activity or Event Identifier: ADMINISTRATION B 31 1			Transaction ID: H400217.E18162	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.91		135.08		170.99

C. Full Name (Last, First, Middle Initial) Huckaby Davis Lisker			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 228 S Washington St Ste 115			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">2088.74</div>	
City Alexandria	State VA	Zip Code 22314-5404	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">01 / 15 / 2010</div>	
Purpose of Disbursement: Compliance Consulting			Category/ Type <div style="border: 1px solid black; width: 100%; height: 15px;"></div>	
Activity or Event Identifier: ADMINISTRATION B 31 1			Transaction ID: H400217.E18163	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
245.91		925.08		1170.99

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Integra Telecom			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 34988			Allocated Activity or Event Year-To-Date 1588.74	
City Seattle	State WA	Zip Code 98124-1988	Date MM / DD / YYYY 01 / 15 / 2010	
Purpose of Disbursement: Phone Service			Category/ Type	
Activity or Event Identifier: ADMINISTRATION B 31 1			Transaction ID: H400217.E18164	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.90		176.43		223.33

B. Full Name (Last, First, Middle Initial) Barbs Professional Bookkeeping & Tax			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 3295 Triangle Dr SE Ste 112			Allocated Activity or Event Year-To-Date 2448.74	
City Salem	State OR	Zip Code 97302-4566	Date MM / DD / YYYY 01 / 15 / 2010	
Purpose of Disbursement: Payroll Service			Category/ Type	
Activity or Event Identifier: ADMINISTRATION B 31 1			Transaction ID: H400217.E18166	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.60		284.40		360.00

C. Full Name (Last, First, Middle Initial) American Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 297813			Allocated Activity or Event Year-To-Date 12185.94	
City Fort Lauderdale	State FL	Zip Code 33329-	Date MM / DD / YYYY 01 / 29 / 2010	
Purpose of Disbursement: Credit Card Bill -- See Below			Category/ Type	
Activity or Event Identifier: ADMINISTRATION B 31 1			Transaction ID: H400217.E18167	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
213.20		802.03		1015.23

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
335.70		1262.86		1598.56

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Costco Tigard			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7855 SW Dartmouth Rd			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">366.88</div>	
City Tigard	State OR	Zip Code 97223-8401	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">01 / 29 / 2010</div>	
Purpose of Disbursement: Office Supplies				
Activity or Event Identifier: ADMINISTRATION B 31 1 [MEMO ITEM] Office Supplies			Transaction ID: H400217.E18171	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px; width: 100%;">77.04</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">289.84</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">366.88</div>

B. Full Name (Last, First, Middle Initial) Oswego Grill			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7 Centerpointe Drive			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">124.15</div>	
City Lake Oswego	State OR	Zip Code 97035-	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">01 / 29 / 2010</div>	
Purpose of Disbursement: Food				
Activity or Event Identifier: ADMINISTRATION B 31 1 [MEMO ITEM] Food			Transaction ID: H400217.E18168	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px; width: 100%;">26.07</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">98.08</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">124.15</div>

C. Full Name (Last, First, Middle Initial) Dominos Pizza			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 15989 Southwest 72nd Avenue			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">24.20</div>	
City Portland	State OR	Zip Code 97223-	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">01 / 29 / 2010</div>	
Purpose of Disbursement: Food				
Activity or Event Identifier: ADMINISTRATION B 31 1 [MEMO ITEM] Food			Transaction ID: H400217.E18170	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px; width: 100%;">5.08</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">19.12</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">24.20</div>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px; width: 100%;">0.00</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">0.00</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">0.00</div>

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px; width: 100%;"></div>	<div style="border: 1px solid black; padding: 2px; width: 100%;"></div>	<div style="border: 1px solid black; padding: 2px; width: 100%;"></div>

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Yuma Solutions Inc.

Mailing Address
PO Box 152075

City State Zip Code
Tampa FL 33684-

Purpose of Disbursement:
Private Server Hosting

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

500.00

Activity or Event Identifier:
ADMINISTRATION B 31 1

[MEMO ITEM] Private Server Hosting

Date 01 / 29 / 2010

Transaction ID: H400217.E18169

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

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

Mailing Address
205 Evergreen Road

City State Zip Code
Lake Oswego OR 97034-

Purpose of Disbursement:
Reimbursement-- See Below

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

9693.97

Activity or Event Identifier:
ADMINISTRATION B 31 1

Date 01 / 26 / 2010

Transaction ID: H400217.E18172

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
108.14		406.81		514.95

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

Mailing Address
3155 SW Cedar Hills Blvd.

City State Zip Code
Beaverton OR 97005-

Purpose of Disbursement:
Food

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

200.00

Activity or Event Identifier:
ADMINISTRATION B 31 1

[MEMO ITEM] Food

Date 01 / 26 / 2010

Transaction ID: H400217.E18174

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.00		158.00		200.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
108.14		406.81		514.95

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Nordstrom <hr/> Mailing Address 9700 SW Wasington Square Rd <hr/> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> <td rowspan="2" style="width:15%; text-align: center;">Category/ Type</td> </tr> <tr> <td>Tigard</td> <td>OR</td> <td>97223-</td> </tr> </table> <hr/> Purpose of Disbursement: Office Supplies	City	State	Zip Code	Category/ Type	Tigard	OR	97223-	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">300.00</div> <hr/> Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">01 / 26 / 2010</div> Transaction ID: H400217.E18173
City	State	Zip Code	Category/ Type					
Tigard	OR	97223-						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
63.00		237.00		300.00

B. Full Name (Last, First, Middle Initial) Papyrus <hr/> Mailing Address Washington Square <hr/> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> <td rowspan="2" style="width:15%; text-align: center;">Category/ Type</td> </tr> <tr> <td>Tigard</td> <td>OR</td> <td>97223-</td> </tr> </table> <hr/> Purpose of Disbursement: Office Supplies	City	State	Zip Code	Category/ Type	Tigard	OR	97223-	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">14.95</div> <hr/> Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">01 / 26 / 2010</div> Transaction ID: H400217.E18175
City	State	Zip Code	Category/ Type					
Tigard	OR	97223-						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.14		11.81		14.95

C. Full Name (Last, First, Middle Initial) Paula Warren <hr/> Mailing Address 18320 NW Chemeketa Lane #237 <hr/> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> <td rowspan="2" style="width:15%; text-align: center;">Category/ Type</td> </tr> <tr> <td>Portland</td> <td>OR</td> <td>97229-</td> </tr> </table> <hr/> Purpose of Disbursement: Reimbursement-- See Below	City	State	Zip Code	Category/ Type	Portland	OR	97229-	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">736.11</div> <hr/> Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">01 / 07 / 2010</div> Transaction ID: H400217.E18176
City	State	Zip Code	Category/ Type					
Portland	OR	97229-						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.62		62.51		79.13

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
16.62		62.51		79.13

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Paula Warren

Mailing Address
18320 NW Chemeketa Lane #237

City State Zip Code
Portland OR 97229-

Purpose of Disbursement:
Mileage

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

16.43

Activity or Event Identifier:
ADMINISTRATION B 31 1
[MEMO ITEM] Mileage

Date 01 / 07 / 2010

Transaction ID: H400217.E18177

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.45		12.98		16.43

B. Full Name (Last, First, Middle Initial)
T- Mobile

Mailing Address
P.O. Box 37380

City State Zip Code
Albuquerque NM 87176-7380

Purpose of Disbursement:
Phone Bill

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

62.70

Activity or Event Identifier:
ADMINISTRATION B 31 1
[MEMO ITEM] Phone Bill

Date 01 / 07 / 2010

Transaction ID: H400217.E18178

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.17		49.53		62.70

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

Mailing Address
14763 SW Grandview Ln

City State Zip Code
Portland OR 97224-

Purpose of Disbursement:
Reimbursement-- See Below

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

156.98

Activity or Event Identifier:
ADMINISTRATION B 31 1

Date 01 / 01 / 2010

Transaction ID: H400217.E18179

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.97		124.01		156.98

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.97		124.01		156.98

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Albertsons Beaverton			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Hall and Greenway			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">60.21</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>	
Beaverton	OR	97005-		
Purpose of Disbursement: Food			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">01 / 01 / 2010</div>	
Activity or Event Identifier: ADMINISTRATION B 31 1 [MEMO ITEM] Food			Transaction ID: H400217.E18183	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.64		47.57		60.21

B. Full Name (Last, First, Middle Initial) Office Depot			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 10520 SW Cascade Ave			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">26.84</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>	
Portland	OR	97223-4302		
Purpose of Disbursement: Office Supplies			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">01 / 01 / 2010</div>	
Activity or Event Identifier: ADMINISTRATION B 31 1 [MEMO ITEM] Office Supplies			Transaction ID: H400217.E18181	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.64		21.20		26.84

C. Full Name (Last, First, Middle Initial) Safeway			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 99 West			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">6.49</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>	
Tigard	OR	97223-		
Purpose of Disbursement: Office Supplies			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">01 / 01 / 2010</div>	
Activity or Event Identifier: ADMINISTRATION B 31 1 [MEMO ITEM] Office Supplies			Transaction ID: H400217.E18182	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.36		5.13		6.49

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Janice Daniels			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address 14763 SW Grandview Ln			Allocated Activity or Event Year-To-Date 63.44			
City	State	Zip Code	Date <input type="text" value="01"/> / <input type="text" value="01"/> / <input type="text" value="2010"/> Transaction ID: H400217.E18180			
Portland	OR	97224-				
Purpose of Disbursement: Mileage			Category/ Type			
Activity or Event Identifier: ADMINISTRATION B 31 1 [MEMO ITEM] Mileage						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
13.32			50.12			63.44

B. Full Name (Last, First, Middle Initial) Julia C Miller			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address 6574 SW Arranmore Ct			Allocated Activity or Event Year-To-Date 15322.58			
City	State	Zip Code	Date <input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2010"/> Transaction ID: H400217.E18184			
Portland	OR	97223-				
Purpose of Disbursement: Reimbursement-- See Below			Category/ Type			
Activity or Event Identifier: ADMINISTRATION B 31 1						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
28.27			106.37			134.64

C. Full Name (Last, First, Middle Initial) AT&T Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address PO Box 30459			Allocated Activity or Event Year-To-Date 134.64			
City	State	Zip Code	Date <input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2010"/> Transaction ID: H400217.E18185			
Los Angeles	CA	90030-				
Purpose of Disbursement: Phone Service			Category/ Type			
Activity or Event Identifier: ADMINISTRATION B 31 1 [MEMO ITEM] Phone Service						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
28.27			106.37			134.64

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.27		106.37		134.64

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Bob Tiernan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 205 Evergreen Road			Allocated Activity or Event Year-To-Date 9179.02		
City Lake Oswego	State OR	Zip Code 97034-	Date <input type="text" value="01"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Reimbursement-- See Below			Transaction ID: H400217.E18186		
Activity or Event Identifier: ADMINISTRATION B 31 1					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
427.77		1609.23		2037.00

B. Full Name (Last, First, Middle Initial) Costco Tigard			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7855 SW Dartmouth Rd			Allocated Activity or Event Year-To-Date 1250.00		
City Tigard	State OR	Zip Code 97223-8401	Date <input type="text" value="01"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Office Supplies			Transaction ID: H400217.E18189		
Activity or Event Identifier: ADMINISTRATION B 31 1 [MEMO ITEM] Office Supplies					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
262.50		987.50		1250.00

C. Full Name (Last, First, Middle Initial) Bob Tiernan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 205 Evergreen Road			Allocated Activity or Event Year-To-Date 569.00		
City Lake Oswego	State OR	Zip Code 97034-	Date <input type="text" value="01"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Mileage			Transaction ID: H400217.E18190		
Activity or Event Identifier: ADMINISTRATION B 31 1 [MEMO ITEM] Mileage					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
119.49		449.51		569.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
427.77		1609.23		2037.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

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

Mailing Address
1444 N California

City	State	Zip Code
Walnut Creek	CA	94596-

Purpose of Disbursement:
Food

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

116.49

Activity or Event Identifier:
ADMINISTRATION B 31 1
[MEMO ITEM]Food

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	6	/	2	0	1	0

Transaction ID: H400217.E18187

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.46		92.03		116.49

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

Mailing Address
44 Church St

City	State	Zip Code
Danville	CA	94526-

Purpose of Disbursement:
Food

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

102.49

Activity or Event Identifier:
ADMINISTRATION B 31 1
[MEMO ITEM]Food

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	6	/	2	0	1	0

Transaction ID: H400217.E18188

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.52		80.97		102.49

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
3531.45	13284.99	16816.44