

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Right to Life/Oregon PAC

Report Covering the Period: From:

M	M
0	4

D	D
2	7

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="center">146938.24</td></tr></table>	146938.24
Y	Y	Y	Y									
2	0	0	6									
146938.24												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="center">168993.71</td></tr></table>	168993.71										
168993.71												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="center">310.00</td></tr></table>	310.00	<table border="1" style="width: 100%;"><tr><td align="center">43195.85</td></tr></table>	43195.85								
310.00												
43195.85												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="center">169303.71</td></tr></table>	169303.71	<table border="1" style="width: 100%;"><tr><td align="center">190134.09</td></tr></table>	190134.09								
169303.71												
190134.09												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="center">12894.35</td></tr></table>	12894.35	<table border="1" style="width: 100%;"><tr><td align="center">33724.73</td></tr></table>	33724.73								
12894.35												
33724.73												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="center">156409.36</td></tr></table>	156409.36	<table border="1" style="width: 100%;"><tr><td align="center">156409.36</td></tr></table>	156409.36								
156409.36												
156409.36												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="center">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="center">0.00</td></tr></table>	0.00										
0.00												

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Right to Life/Oregon PAC

Report Covering the Period: From:

M	M
0	4

D	D
2	7

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	0.00	0.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	310.00	43195.85
(iii) TOTAL (add Lines 11(a)(i) and (ii)	310.00	43195.85
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	310.00	43195.85
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
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))	310.00	43195.85
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	310.00	43195.85

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	12888.35	33608.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	12888.35	33608.04
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	6.00	116.69
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	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	12894.35	33724.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	12894.35	33724.73

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	310.00	43195.85
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	310.00	43195.85
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	12888.35	33608.04
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	12888.35	33608.04

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Right to Life/Oregon PAC

Full Name (Last, First, Middle Initial) A. Ms Lois Anderson		Transaction ID: SB21B.6970 Date of Disbursement MM / DD / YYYY 04 / 28 / 2006
Mailing Address 1220 Jays Dr N		Amount of Each Disbursement this Period 1950.00
City Keizer State OR Zip Code 97303	Purpose of Disbursement Wages Candidate Name Category/Type 001	
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) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Mrs. Gayle Atteberry		Transaction ID: SB21B.6971 Date of Disbursement MM / DD / YYYY 04 / 28 / 2006
Mailing Address 87366 Dukhobar Rd		Amount of Each Disbursement this Period 837.50
City Eugene State OR Zip Code 97402	Purpose of Disbursement Wages Candidate Name Category/Type 001	
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) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. Gateway Communications		Transaction ID: SB21B.6983 Date of Disbursement MM / DD / YYYY 06 / 01 / 2006
Mailing Address 14107 NE Airport Way		Amount of Each Disbursement this Period 1100.00
City Portland State OR Zip Code 97230	Purpose of Disbursement budgetary & financial services Candidate Name Category/Type 001	
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) ▶	1100.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Right to Life/Oregon PAC

A. Glick Associates Full Name (Last, First, Middle Initial) Mailing Address 1717 SW Park Avenue Ste # 613 City Portland State OR Zip Code 97201 Purpose of Disbursement Address corrections 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: SB21B.6990 Date of Disbursement: M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 6 Amount of Each Disbursement this Period: 740.00 Category/Type: 001
--	--	--

B. Ms Jane Groff Full Name (Last, First, Middle Initial) Mailing Address 4576 Janice Ave NE City Salem State OR Zip Code 97305 Purpose of Disbursement Wages 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: SB21B.6974 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6 Amount of Each Disbursement this Period: 1126.25 Category/Type: 001 [MEMO ITEM]
---	--	---

C. Michelle Knopp Full Name (Last, First, Middle Initial) Mailing Address 8310 E Burnside City Portland State OR Zip Code 97216 Purpose of Disbursement Mileage 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: SB21B.6967 Date of Disbursement: M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6 Amount of Each Disbursement this Period: 175.00 Category/Type: 002
--	--	--

SUBTOTAL of Disbursements This Page (optional)	915.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)
Right to Life/Oregon PAC

Full Name (Last, First, Middle Initial) A. Michelle Knopp		Transaction ID: SB21B.6972 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 8310 E Burnside		Amount of Each Disbursement this Period 1950.00
City Portland State OR Zip Code 97216	[MEMO ITEM]	
Purpose of Disbursement Wages Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Michelle Knopp		Transaction ID: SB21B.6993 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address 8310 E Burnside		Amount of Each Disbursement this Period 175.00
City Portland State OR Zip Code 97216	[MEMO ITEM]	
Purpose of Disbursement Mileage Candidate Name		002 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Oregon Department of Revenue		Transaction ID: SB21B.6978 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address PO Box 14800		Amount of Each Disbursement this Period 112.34
City Salem State OR Zip Code 97309	[MEMO ITEM]	
Purpose of Disbursement State payroll taxes Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	175.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
Right to Life/Oregon PAC

Full Name (Last, First, Middle Initial) A. Oregon Right to Life		Transaction ID: SB21B.6968 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 4335 River Road N		Amount of Each Disbursement this Period 9456.98
City Salem State OR Zip Code 97303	001 Category/ Type	
Purpose of Disbursement Wages, health benefits, payroll taxes		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Oregon Right to Life		Transaction ID: SB21B.6981 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6
Mailing Address 4335 River Road N		Amount of Each Disbursement this Period 766.00
City Salem State OR Zip Code 97303	001 Category/ Type	
Purpose of Disbursement Postage, printing, supplies, equip		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Oregon Right to Life Ed. Foundation		Transaction ID: SB21B.6982 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6
Mailing Address 4335 River Road N		Amount of Each Disbursement this Period 366.67
City Salem State OR Zip Code 97303	001 Category/ Type	
Purpose of Disbursement rent		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	10589.65
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 10 / 14

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

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

NAME OF COMMITTEE (In Full)
Right to Life/Oregon PAC

Full Name (Last, First, Middle Initial) A. Oregon Telecom		Transaction ID: SB21B.6992 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 6
Mailing Address PO Box 4333		Amount of Each Disbursement this Period 108.70
City Salem State OR Zip Code 97302		
Purpose of Disbursement Telephone Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. PacifiCare		Transaction ID: SB21B.6977 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address PO Box 3007		Amount of Each Disbursement this Period 519.01 [MEMO ITEM]
City Hillsboro State OR Zip Code 97123		
Purpose of Disbursement Health insurance Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mrs. Mary C. Parsons		Transaction ID: SB21B.6976 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 1675 Ewald Ave SE		Amount of Each Disbursement this Period 471.70 [MEMO ITEM]
City Salem State OR Zip Code 97302		
Purpose of Disbursement Wages Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	108.70
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 11 / 14

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

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

NAME OF COMMITTEE (In Full)
Right to Life/Oregon PAC

Full Name (Last, First, Middle Initial) A. Ms Bernetta Simpson		Transaction ID: SB21B.6975 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 190 37th Ave SE		Amount of Each Disbursement this Period 1020.01
City Salem State OR Zip Code 97301	Purpose of Disbursement Wages Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. US Bank		Transaction ID: SB21B.6979 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address Center & Lancaster		Amount of Each Disbursement this Period 634.36
City Salem State OR Zip Code 97301	Purpose of Disbursement Federal payroll taxes Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Ms Theresa Vandecoevering		Transaction ID: SB21B.6973 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 2160 Trade St SE		Amount of Each Disbursement this Period 835.81
City Salem State OR Zip Code 97301	Purpose of Disbursement Wages Candidate Name Category/Type 001	
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) ▶	0.00
TOTAL This Period (last page this line number only) ▶	12888.35

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 / 14	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Right to Life/Oregon PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Design Point	Nature of Debt (Purpose): Design voter guide--estimate
Mailing Address 1462 Commercial NE	
City State ZIP Code Salem OR 97303	

Outstanding Balance Beginning This Period	Transaction ID: SD10.6948	
6.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	6.00	0.00

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	0.00
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Right to Life/Oregon PAC		FEC IDENTIFICATION NUMBER C <input style="width:80%;" type="text"/>
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		
Full Name (Last, First, Middle, Initial) of Payee UNITEMIZED Independent Expenditures		Date <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address		Amount <input style="width:80%;" type="text"/> .00
City	State	Zip Code
Purpose of Expenditure	Category/Type	<input type="text"/>
Name of Federal Candidate supported or Opposed by expenditure:		Transaction ID:
		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential
		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____
Calendar Year-To-Date Per Election for Office Sought		<input style="width:80%;" type="text"/>

(a) SUBTOTAL of Itemized Independent Expenditures	<input style="width:80%;" type="text"/> 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	<input style="width:80%;" type="text"/> 6.00
(c) TOTAL Independent Expenditures	<input style="width:80%;" type="text"/> 6.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Signature _____	Date <input type="text"/> / <input type="text"/> / <input type="text"/>

Form/Schedule: **F3XN**

Transaction ID:

The State of Oregon allows a \$50 per individual tax credit per year for Political Action Committee donations. None of the donations which Right to Life/Oregon PAC received in the June 15 Quarterly for 2006 were over \$200 per individual and none accumulated to over \$200 for the calendar year. Schedule B expenditures for 'Postage, printing, supplies, equip' were not expenditures for public communications and voter drive activity and did not contain express advocacy. All memo items dated 04/28/06 belong to check #160 for \$9456.98--check was written to Oregon Right to Life for wages, employee benefits & payroll taxes.