SECRETARY OF THE SENATE

05 APR 14 PM 3:28

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For 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

Wyden for Senate

ADDRESS (number and street) PO Box 3496

☐ Check if different than previously reported. (ACC)

Portland | OR | 97208

CITY ▲ STATE ▲ ZIP CODE ▲

2 FEC IDENTIFICATION NUMBER ▼ C00308676

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

STATE ▼ DISTRICT OR

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☒ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12S)

Election on ____ In the State of ____

(c) 30-Day POST-Election Report for the:

☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on ____ In the State of ____

5. Covering Period 01 01 2006 through 03 31 2006

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 Louis Savage

Signature of Treasurer [signature] Date 04 08 2006

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

Office Use Only

FEC FORM 3
(Revised 02/2003)

26020191325

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003) — Page 2

Write or Type Committee Name

Wyden for Senate

Report Covering the Period: From: M M 01 D D 01 Y Y Y Y 2005 To: M M 03 D D 31 Y Y Y Y 2006

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	7115.00	62885.00
(b) Total Contribution Refunds (from Line 20(d))	900.00	900.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	6215.00	61985.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	26300.47	391746.00
(b) Total Offsets to Operating Expenditures (from Line 14)	1306.66	1797.11
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	24993.81	389948.89
8. Cash on Hand at Close of Reporting Period (from Line 27)	1120887.73	
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)	0.00	

For further information contact:

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

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

26020181326

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Wyden for Senate

Report Covering the Period: From: M M 01 D D 01 Y Y Y Y 2006 To: M M 03 D D 31 Y Y Y Y 2006

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	6200.00	37585.00
(ii) Unitemized	415.00	3800.00
(iii) TOTAL of contributions from individuals	6615.00	41385.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACS)	500.00	21500.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	7115.00	62885.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	5068.09
13. LOANS (a) Made or Guaranteed by the Candidate	0.00	0.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	1306.66	1797.11
15. OTHER RECEIPTS (Dividends, Interest, etc.)	20725.22	64454.64
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	29146.88	134204.84

26020181527

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

II. DISBURSEMENTS

	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	26300.47	391746.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
(b) Of all Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20. 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)	900.00	900.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	900.00	900.00
21. OTHER DISBURSEMENTS	152250.00	1031870.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) >	179450.47	1424516.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	1271191.32
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)	29146.88
25. SUBTOTAL (add Line 23 and Line 24)	1300338.20
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	179450.47
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	1120887.73

26020161328

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 53
(check only one)
X 11a | 11b | 11c | 11d | 12 | 13a | 13b | 14 | 15

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Daniel Byrne
Mailing Address 1125 NW Couch Street
Suite 900
City: Portland | State: OR | Zip Code: 97209
FEC ID number of contributing federal political committee: C
Name of Employer: M Financial
Occupation: Sr. VP Chief Product & Tech. Officer
Receipt For: 2010 — X Primary — General — Other (specify)
Election Cycle-to-Date: 1000.00
Date of Receipt: 02 / 08 / 2006
Transaction ID: SA11A1.19700
Amount of Each Receipt this Period: 1000.00
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Donald Friedman
Mailing Address 2818 NE US Grant Place
City: Portland | State: OR | Zip Code: 97212
FEC ID number of contributing federal political committee: C
Name of Employer: M Benefit Solutions
Occupation: Executive
Receipt For: 2010 — X Primary — General — Other (specify)
Election Cycle-to-Date: 1200.00
Date of Receipt: 02 / 17 / 2006
Transaction ID: SA11A1.19812
Amount of Each Receipt this Period: 700.00
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Andrew Graves
Mailing Address 2096 Volpp Street
City: West Linn | State: OR | Zip Code: 97068
FEC ID number of contributing federal political committee: C
Name of Employer: M Financial Group
Occupation: Executive
Receipt For: 2010 — X Primary — General — Other (specify)
Election Cycle-to-Date: 1000.00
Date of Receipt: 02 / 08 / 2006
Transaction ID: SA11A1.19698
Amount of Each Receipt this Period: 1000.00
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 2700.00

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

26626181329

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 53
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Eleanor I. Johnson
Mailing Address 827 Windsonr Dr. SE
City: Sammamish | State: WA | Zip Code: 98074
FEC ID number of contributing federal political committee: C
Name of Employer: Self
Occupation: CPA
Receipt For: 2010 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 500.00
Date of Receipt: 01 / 25 / 2006
Transaction ID: SA11A1.19577
Amount of Each Receipt this Period: 500.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Robert Miller
Mailing Address 120 Broadway
37th Floor
City: New York | State: NY | Zip Code: 10271
FEC ID number of contributing federal political committee: C
Name of Employer: Miller-Pomeranz
Occupation: CLU
Receipt For: 2010 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00
Date of Receipt: 03 / 31 / 2006
Transaction ID: SA11A1.19744
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Lawton Nease, III
Mailing Address 5720 Winterhur Lane NW
City: Atlanta | State: GA | Zip Code: 30328
FEC ID number of contributing federal political committee: C
Name of Employer: Nease, Lagana, Eden & Culley
Occupation: CLU
Receipt For: 2010 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 1000.00
Date of Receipt: 02 / 17 / 2006
Transaction ID: SA11A1.19810
Amount of Each Receipt this Period: 1000.00
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 2500.00

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

26020193139

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 53
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Susan O'Sullivan

Mailing Address 9150 NW Murdock Street

City: Portland
State: OR
Zip Code: 97229

FEC ID number of contributing federal political committee: C

Name of Employer
M Financial Group

Occupation
VP Marketing

Receipt For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
02 / 14 / 2006

Transaction ID: SA11A1.19808

Amount of Each Receipt this Period
1000.00

[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

TOTAL This Period (last page this line number only) ▶ 6200.00

26020181331

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: ! PAGE 8 / 53
(check only one)
11a [ ] 11b [X] 11c [ ] 11d [ ]
12 [ ] 13a [ ] 13b [ ] 14 [ ] 15 [ ]

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NAME OF COMMITTEE (In Full)
Wyden for Senate

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

Mailing Address 316 Penn Ave SE
Suite 304

City: Washington
State: DC
Zip Code: 20003

FEC ID number of contributing federal political committee: C C00064766

Name of Employer

Occupation

Receipt For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M 03 / D D 17 / Y Y Y Y 2006

Transaction ID: SA11C.19743

Amount of Each Receipt this Period
500.00

[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 500.00

TOTAL This Period (last page this line number only) ▶ 500.00

26020613562

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9/53
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Wyden for Senate

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

Mailing Address PO Box 12489

City: Seattle | State: WA | Zip Code: 98111

FEC ID number of contributing federal political committee: C

Name of Employer

Occupation

Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1306.66

Date of Receipt
03 | 14 | 2006

Transaction ID: SA14.19702

Amount of Each Receipt this Period
1306.66

Refund

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 1306.66

TOTAL This Period (last page this line number only) ▶ 1306.66

26020181353

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 53
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A.
Full Name (Last, First, Middle Initial)
Bank of America
Mailing Address 900 West Trade Street
City: Charlotte | State: NC | Zip Code: 28255
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 45174.87

Date of Receipt: 01 / 30 / 2006
Transaction ID: SA15.19831
Amount of Each Receipt this Period: 1681.45
Interest
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.
Full Name (Last, First, Middle Initial)
Bank of America
Mailing Address 900 West Trade Street
City: Charlotte | State: NC | Zip Code: 28255
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 50643.62

Date of Receipt: 02 / 15 / 2006
Transaction ID: SA15.19832
Amount of Each Receipt this Period: 5468.75
Interest
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.
Full Name (Last, First, Middle Initial)
Bank of America
Mailing Address 900 West Trade Street
City: Charlotte | State: NC | Zip Code: 28255
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 56003.00

Date of Receipt: 02 / 15 / 2006
Transaction ID: SA15.19833
Amount of Each Receipt this Period: 5359.38
Interest
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 12509.58

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

25020613134

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 53
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Bank of America
Mailing Address 900 West Trade Street
City: Charlotte | State: NC | Zip Code: 28255
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 60815.50

Date of Receipt: 02 / 15 / 2006
Transaction ID: SA15.19834
Amount of Each Receipt this Period: 4812.50
Interest
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Bank of America
Mailing Address 900 West Trade Street
City: Charlotte | State: NC | Zip Code: 28255
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 62406.48

Date of Receipt: 02 / 27 / 2006
Transaction ID: SA15.19835
Amount of Each Receipt this Period: 1590.98
Interest
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Bank of America
Mailing Address 900 West Trade Street
City: Charlotte | State: NC | Zip Code: 28255
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 64167.28

Date of Receipt: 03 / 30 / 2006
Transaction ID: SA15.19838
Amount of Each Receipt this Period: 1760.80
Dividend
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 8164.28

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

SA15 19838

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 53
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address PO Box 25118

City: Tampa
State: FL
Zip Code: 33622

FEC ID number of contributing federal political committee: C

Name of Employer

Occupation

Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date ▼
253.70

Date of Receipt
03 / 31 / 2006

Transaction ID: SA15.19821

Amount of Each Receipt this Period
17.70

Interest

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 17.70

TOTAL This Period (last page this line number only) ▶ 20691.56

26020191236

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) — PAGE 13 / 53

[X] 17 [ ] 18 [ ] 19a [ ] 19b [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie | State: OR | Zip Code: 97220

Purpose of Disbursement: Payroll fees
Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19616
Date of Disbursement: 01 / 13 / 2006

Amount of Each Disbursement this Period: 44.69

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie | State: OR | Zip Code: 97220

Purpose of Disbursement: Payroll fees
Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19618
Date of Disbursement: 01 / 18 / 2006

Amount of Each Disbursement this Period: 51.60

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie | State: OR | Zip Code: 97220

Purpose of Disbursement: Taxes
Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19619
Date of Disbursement: 01 / 23 / 2006

Amount of Each Disbursement this Period: 2.04

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 98.33

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

26020181337

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

PAGE 14 / 53

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NAME OF COMMITTEE (In Full)
Wyden for Senate

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie | State: OR | Zip Code: 97220

Purpose of Disbursement: Payroll fees

Candidate Name

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19621
Date of Disbursement: 01 / 31 / 2006

Amount of Each Disbursement this Period: 44.69

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie | State: OR | Zip Code: 97220

Purpose of Disbursement: Payroll Processing

Candidate Name

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19632
Date of Disbursement: 02 / 14 / 2006

Amount of Each Disbursement this Period: 46.39

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie | State: OR | Zip Code: 97220

Purpose of Disbursement: Payroll Taxes

Candidate Name

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19633
Date of Disbursement: 02 / 14 / 2006

Amount of Each Disbursement this Period: 331.23

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 422.31

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

FEC Schedule B (Form 3) Rev. 02/2003

26020191338

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie | State: OR | Zip Code: 97220

Purpose of Disbursement: Payroll Processing

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

001 Category/ Type

Transaction ID: SB17.19640
Date of Disbursement: 02 / 28 / 2006

Amount of Each Disbursement this Period: 46.39

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie | State: OR | Zip Code: 97220

Purpose of Disbursement: Payroll Taxes

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

001 Category/ Type

Transaction ID: SB17.19641
Date of Disbursement: 02 / 28 / 2006

Amount of Each Disbursement this Period: 178.62

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie | State: OR | Zip Code: 97220

Purpose of Disbursement: Payroll Processing

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

001 Category/ Type

Transaction ID: SB17.19709
Date of Disbursement: 03 / 15 / 2006

Amount of Each Disbursement this Period: 46.39

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 271.40

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

26020181349

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie | State: OR | Zip Code: 97220

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

001 Category/ Type

Transaction ID: SB17.19710
Date of Disbursement: 03 / 15 / 2006

Amount of Each Disbursement this Period: 331.23

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie | State: OR | Zip Code: 97220

Purpose of Disbursement
Payroll Fees

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

001 Category/ Type

Transaction ID: SB17.19825
Date of Disbursement: 03 / 15 / 2006

Amount of Each Disbursement this Period: 6.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie | State: OR | Zip Code: 97220

Purpose of Disbursement
Payroll Processing

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

001 Category/ Type

Transaction ID: SB17.19816
Date of Disbursement: 03 / 31 / 2006

Amount of Each Disbursement this Period: 46.39

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 383.62

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

26020613549

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) — PAGE 17 / 53

[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

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

Mailing Address 4099 SE International Way
Suite #220

City: Milwaukie | State: OR | Zip Code: 97220

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Category/ Type: 001

Transaction ID: SB17.19617
Date of Disbursement: 03 / 31 / 2006

Amount of Each Disbursement this Period: 331.23

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address 900 West Trade Street

City: Charlotte | State: NC | Zip Code: 28255

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Category/ Type: 001

Transaction ID: SB17.19623
Date of Disbursement: 01 / 01 / 2006

Amount of Each Disbursement this Period: 40.95

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address 900 West Trade Street

City: Charlotte | State: NC | Zip Code: 28255

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Category/ Type: 001

Transaction ID: SB17.19624
Date of Disbursement: 01 / 01 / 2006

Amount of Each Disbursement this Period: 55.50

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 427.68

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

26020613441

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address PO Box 3977

City Seattle | State WA | Zip Code 98124

Purpose of Disbursement
Credit Card

Candidate Name

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19585
Date of Disbursement 01 / 25 / 2006

Amount of Each Disbursement this Period
626.59

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Senators Dining Room

Mailing Address S-120 Capitol

City Washington | State DC | Zip Code 20510

Purpose of Disbursement
meeting expense

Candidate Name

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19585.0
Date of Disbursement 01 / 25 / 2006

Amount of Each Disbursement this Period
65.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Senators Dining Room

Mailing Address S-120 Capitol

City Washington | State DC | Zip Code 20510

Purpose of Disbursement
meeting expense

Candidate Name

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19585.3
Date of Disbursement 01 / 25 / 2006

Amount of Each Disbursement this Period
66.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 626.59

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

26020134852

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Senators Dining Room

Mailing Address S-120 Capitol

City: Washington | State: DC | Zip Code: 20510

Purpose of Disbursement: meeting expense
Candidate Name:

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19585.4
Date of Disbursement: 01 / 25 / 2006

Amount of Each Disbursement this Period: 39.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

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

Mailing Address 7000 NE Airport Way Room B1416

City: Portland | State: OR | Zip Code: 97218

Purpose of Disbursement: travel expense
Candidate Name:

002 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19585.8
Date of Disbursement: 01 / 25 / 2006

Amount of Each Disbursement this Period: 3.99

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

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

Mailing Address 7000 NE Airport Way Room B1416

City: Portland | State: OR | Zip Code: 97218

Purpose of Disbursement: travel expense
Candidate Name:

002 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19585.9
Date of Disbursement: 01 / 25 / 2006

Amount of Each Disbursement this Period: 3.99

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

26029913343

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Postal Annex

Mailing Address 1631 NE Broadway Street

City: Portland | State: OR | Zip Code: 97232

Purpose of Disbursement: shipping
Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19585.12
Date of Disbursement: 01 / 25 / 2006

Amount of Each Disbursement this Period: 82.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Comcast Cable Comm.

Mailing Address PO Box 173885

City: Comcast | State: CO | Zip Code: 80217

Purpose of Disbursement: Internet service
Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19585.13
Date of Disbursement: 01 / 25 / 2006

Amount of Each Disbursement this Period: 55.95

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address PO Box 9312

City: Minneapolis | State: MN | Zip Code: 55440

Purpose of Disbursement: office supplies
Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19585.14
Date of Disbursement: 01 / 25 / 2006

Amount of Each Disbursement this Period: 178.48

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

26020181342

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
AT&T Worldnet

Mailing Address PO Box 15158

City: Asheville | State: NC | Zip Code: 28813

Purpose of Disbursement: internet service
Candidate Name:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Category/Type: 001

Transaction ID: SB17.19585.16
Date of Disbursement: 01 / 25 / 2006

Amount of Each Disbursement this Period: 19.95

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 900 2nd Street NE

City: Washington | State: DC | Zip Code: 20002

Purpose of Disbursement: travel expense
Candidate Name:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Category/Type: 002

Transaction ID: SB17.19585.17
Date of Disbursement: 01 / 25 / 2006

Amount of Each Disbursement this Period: -147.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 1620 Prince Street

City: Alexandria | State: VA | Zip Code: 22314

Purpose of Disbursement: flowers
Candidate Name:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Category/Type: 001

Transaction ID: SB17.19585.21
Date of Disbursement: 01 / 25 / 2006

Amount of Each Disbursement this Period: 73.95

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

25020131345

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

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

Mailing Address 942 S Shady Grove Road

City: Memphis | State: TN | Zip Code: 38120

Purpose of Disbursement: shipping
Candidate Name:

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19585.22
Date of Disbursement: 01 / 25 / 2006

Amount of Each Disbursement this Period: 23.28

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address PO Box 3977

City: Seattle | State: WA | Zip Code: 98124

Purpose of Disbursement: Bank Service Charge
Candidate Name:

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19622
Date of Disbursement: 01 / 31 / 2006

Amount of Each Disbursement this Period: 3.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Bank Of America

Mailing Address PO Box 2930

City: Phoenix | State: AZ | Zip Code: 85062

Purpose of Disbursement: Bank Fees
Candidate Name:

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19627
Date of Disbursement: 02 / 01 / 2006

Amount of Each Disbursement this Period: 56.40

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 59.40

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

26020134345

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) — PAGE 23 / 53

[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Bank Of America

Mailing Address PO Box 2930

City: Phoenix — State: AZ — Zip Code: 85062

Purpose of Disbursement: Bank Fees

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President — State: District:

Disbursement For: 2010 — [X] Primary [ ] General [ ] Other (specify)

001 Category/ Type

Transaction ID: SB17.19828
Date of Disbursement: 02 / 01 / 2006

Amount of Each Disbursement this Period: 41.15

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address PO Box 3977

City: Seattle — State: WA — Zip Code: 98124

Purpose of Disbursement: Bank Fees

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President — State: District:

Disbursement For: 2010 — [X] Primary [ ] General [ ] Other (specify)

001 Category/ Type

Transaction ID: SB17.19822
Date of Disbursement: 03 / 01 / 2006

Amount of Each Disbursement this Period: 54.90

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address PO Box 3977

City: Seattle — State: WA — Zip Code: 98124

Purpose of Disbursement: Bank Fees

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President — State: District:

Disbursement For: 2010 — [X] Primary [ ] General [ ] Other (specify)

001 Category/ Type

Transaction ID: SB17.19823
Date of Disbursement: 03 / 01 / 2006

Amount of Each Disbursement this Period: 40.95

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 137.00

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

26020613947

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address PO Box 3977

City: Seattle | State: WA | Zip Code: 98124

Purpose of Disbursement: Credit Card
Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19646
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 2212.46

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address PO Box 1915

City: Beltsville | State: MD | Zip Code: 20705

Purpose of Disbursement: Telephone Service
Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19646.5
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 49.98

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address PO Box 650580

City: Dallas | State: TX | Zip Code: 75265

Purpose of Disbursement: Shipping
Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19646.8
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 24.47

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 2212.46

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

28020315488

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) PAGE 25 / 53

[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Paradies Portland

Mailing Address 7000 NE Airport Way
Room B1416

City: Portland State: OR Zip Code: 97218

Purpose of Disbursement: Travel Expenses
Candidate Name

002 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19646.9
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 13.85

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 7000 NE Airport Way
Room B1416

City: Portland State: OR Zip Code: 97218

Purpose of Disbursement: Travel Expenses
Candidate Name

002 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19646.11
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 11.69

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 7000 NE Airport Way
Room B1416

City: Portland State: OR Zip Code: 97218

Purpose of Disbursement: Travel Expenses
Candidate Name

002 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19646.12
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 20.05

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

26020181459

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Paradies Portland

Mailing Address 7000 NE Airport Way
Room B1416

City: Portland | State: OR | Zip Code: 97218

Purpose of Disbursement: Travel Expenses
Candidate Name:

Category/ Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19646.13
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 1.59

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address One Meadowlands Plaza

City: East Rutherford | State: NJ | Zip Code: 07073

Purpose of Disbursement: Travel Expenses
Candidate Name:

Category/ Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19646.15
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 13.23

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 15 E Street NW

City: Washington | State: DC | Zip Code: 20001

Purpose of Disbursement: Meeting Expenses
Candidate Name:

Category/ Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19646.18
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 57.58

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

26020181259

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

[X] 17 [ ] 18 [ ] 18a [ ] 18b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Paradies Washington National

Mailing Address Washington National Airport

City: Washington | State: DC | Zip Code: 20001

Purpose of Disbursement: Travel Expenses
Candidate Name

Category/ Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19646.19
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 11.90

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address One MeadowMands Plaza

City: East Rutherford | State: NJ | Zip Code: 07073

Purpose of Disbursement: Travel Expenses
Candidate Name

Category/ Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19646.22
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 13.44

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Paradies Washington National

Mailing Address Washington National Airport

City: Washington | State: DC | Zip Code: 20001

Purpose of Disbursement: Travel Expenses
Candidate Name

Category/ Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19646.23
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 10.04

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

26020613552

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
International News

Mailing Address

City: New York | State: NY | Zip Code:

Purpose of Disbursement: Travel Expenses
Candidate Name

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19646.24
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 26.78

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address: One Meadowlands Plaza

City: East Rutherford | State: NJ | Zip Code: 07073

Purpose of Disbursement: Travel Expenses
Candidate Name

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19646.25
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 19.79

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address: 942 S Shady Grove Road

City: Memphis | State: TN | Zip Code: 38120

Purpose of Disbursement: Shipping
Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19646.26
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 16.43

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

26931952

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

PAGE 29 / 53

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
South Buffet

Mailing Address US Capitol

City: Washington | State: DC | Zip Code: 20510

Purpose of Disbursement: Meeting Expenses
Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19646.28
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 29.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 1901 L Street NW

City: Washington | State: DC | Zip Code: 20036

Purpose of Disbursement: Office Supplies
Candidate Name:

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19646.30
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 50.58

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Comcast Cable Comm.

Mailing Address PO Box 173885

City: Comcast | State: CO | Zip Code: 80217

Purpose of Disbursement: Internet Service
Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19646.31
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 55.95

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

26020191355

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
AT&T Worldnet

Mailing Address PO Box 15158

City Asheville | State NC | Zip Code 28813

Purpose of Disbursement
Internet Service

Candidate Name

Category/ Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19646.33
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 19.95

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address PO Box 66100

City Chicago | State IL | Zip Code 60666

Purpose of Disbursement
Airfare

Candidate Name

Category/ Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19646.35
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 809.30

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 201 Massachussetts Avenue NE

City Washington | State DC | Zip Code 20002

Purpose of Disbursement
Agent Fee

Candidate Name

Category/ Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19646.36
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 25.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

26020131545

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) — PAGE 31 / 53

[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
United Air

Mailing Address PO Box 66100

City: Chicago — State: IL — Zip Code: 60666

Purpose of Disbursement: Airfare
Candidate Name:

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President — State: — District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19648.37
Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 627.60

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address PO Box 3977

City: Seattle — State: WA — Zip Code: 98124

Purpose of Disbursement: Taxes
Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President — State: — District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19706
Date of Disbursement: 03 / 10 / 2006

Amount of Each Disbursement this Period: 5645.47

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Bank Of America

Mailing Address PO Box 2930

City: Phoenix — State: AZ — Zip Code: 85062

Purpose of Disbursement: Credit Card
Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President — State: — District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19716
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 3254.26

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 8899.73

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

15030214631

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Hotels.com

Mailing Address 10440 North Central Expressway

City: Dallas | State: TX | Zip Code: 75231

Purpose of Disbursement: Lodging
Candidate Name:

Category/ Type: 002

Office Sought: [ ] House [ ] Senate [ ] President | State: | District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19716.3
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 271.60

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address US Capitol

City: Washington | State: DC | Zip Code: 20510

Purpose of Disbursement: Meeting Expenses
Candidate Name:

Category/ Type: 001

Office Sought: [ ] House [ ] Senate [ ] President | State: | District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19716.9
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 29.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
David Burke Donatella

Mailing Address 133 East 61st Street

City: New York | State: NY | Zip Code: 10021

Purpose of Disbursement: Fundraising Expenses
Candidate Name:

Category/ Type: 003

Office Sought: [ ] House [ ] Senate [ ] President | State: | District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19716.10
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 317.14

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

26020181355

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

PAGE 33 / 53

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Hudson News

Mailing Address One Meadowlands Plaza

City: East Rutherford | State: NJ | Zip Code: 07073

Purpose of Disbursement: Travel Expenses
Candidate Name

Category/ Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19716.11
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 5.95

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Sir Francis Drake Hotel

Mailing Address 450 Powell Street

City: San Francisco | State: CA | Zip Code: 94102

Purpose of Disbursement: Lodging
Candidate Name

Category/ Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19716.17
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 205.06

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Sir Francis Drake Hotel

Mailing Address 450 Powell Street

City: San Francisco | State: CA | Zip Code: 94102

Purpose of Disbursement: Lodging
Candidate Name

Category/ Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19716.18
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 204.56

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

26620135057

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) | PAGE 34 / 53

[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Sir Francis Drake Hotel

Mailing Address 450 Powell Street

City: San Francisco | State: CA | Zip Code: 94102

Purpose of Disbursement: Food and Beverage
Candidate Name:

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19716.19
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 12.48

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 942 S Shady Grove Road

City: Memphis | State: TN | Zip Code: 38120

Purpose of Disbursement: Shipping
Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19716.22
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 12.67

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Hertz Rent-A-Car

Mailing Address 225 Brae Blvd.

City: Parkridge | State: NJ | Zip Code: 07656

Purpose of Disbursement: Rental Car
Candidate Name:

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19716.23
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 202.04

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

FEC Schedule B (Form 3) Rev. 02/2003

25020135

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
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[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Hudson News

Transaction ID: SB17.19716.28
Date of Disbursement: 03 / 28 / 2006

Mailing Address: One Meadowlands Plaza

City: East Rutherford | State: NJ | Zip Code: 07073

Amount of Each Disbursement this Period: 18.38

Purpose of Disbursement: Travel Expenses
Candidate Name:

Category/Type: 002

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

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

Transaction ID: SB17.19716.36
Date of Disbursement: 03 / 28 / 2006

Mailing Address: 942 S Shady Grove Road

City: Memphis | State: TN | Zip Code: 38120

Amount of Each Disbursement this Period: 24.63

Purpose of Disbursement: Shipping
Candidate Name:

Category/Type: 001

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

C. Full Name (Last, First, Middle Initial)
Washington Flyer Taxi

Transaction ID: SB17.19716.47
Date of Disbursement: 03 / 28 / 2006

Mailing Address: PO Box 17045

City: Washington | State: DC | Zip Code: 20041

Amount of Each Disbursement this Period: 70.00

Purpose of Disbursement: Travel Expenses
Candidate Name:

Category/Type: 002

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

25020135159

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Senators Dining Room

Mailing Address S-120 Capitol

City: Washington | State: DC | Zip Code: 20510

Purpose of Disbursement: Meeting Expenses
Candidate Name:

Category/ Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19716.48
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 76.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Comcast Cable Comm.

Mailing Address PO Box 173885

City: Comcast | State: CO | Zip Code: 80217

Purpose of Disbursement: Internet Service
Candidate Name:

Category/ Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19716.51
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 55.95

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

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

Mailing Address 942 S Shady Grove Road

City: Memphis | State: TN | Zip Code: 38120

Purpose of Disbursement: Shipping
Candidate Name:

Category/ Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19716.52
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 13.16

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

25239139

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Senators Dining Room

Mailing Address S-120 Capitol

City: Washington | State: DC | Zip Code: 20510

Purpose of Disbursement: Meeting Expenses
Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Category/Type: 001

Transaction ID: SB17.19716.53
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 60.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

(MEMO ITEM)

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

Mailing Address 201 Massachussetts Avenue NE

City: Washington | State: DC | Zip Code: 20002

Purpose of Disbursement: Agent Fee
Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Category/Type: 002

Transaction ID: SB17.19716.54
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 30.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

(MEMO ITEM)

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

Mailing Address 900 2nd Street NE

City: Washington | State: DC | Zip Code: 20002

Purpose of Disbursement: Travel Expenses
Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Category/Type: 002

Transaction ID: SB17.19716.55
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 320.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

(MEMO ITEM)

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

26613213451

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
AT&T Worldnet

Mailing Address PO Box 15158

City: Asheville | State: NC | Zip Code: 28813

Purpose of Disbursement: Internet Service
Candidate Name

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19716.57
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 19.95

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 1901 L Street NW

City: Washington | State: DC | Zip Code: 20036

Purpose of Disbursement: Office Supplies
Candidate Name

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19716.59
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 172.44

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address 3800 SE 22nd

City: Portland | State: OR | Zip Code: 97202

Purpose of Disbursement: Office Equipment
Candidate Name

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19716.61
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 51.30

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

25020181362

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) — PAGE 39 / 53

[X] 17	[ ] 18	[ ] 19a	[ ] 19b	
[ ] 20a	[ ] 20b	[ ] 20c	[ ] 21	

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NAME OF COMMITTEE (In Full)
Wyden for Senate

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

Mailing Address 815 NW Hoyt

City: Portland — State: OR — Zip Code: 97208

Purpose of Disbursement: Postage
Candidate Name

Category/ Type: 001

Office Sought: [ ] House [ ] Senate [ ] President — State: — District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19716.62
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 4.20

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address PO Box 8229

City: Aurora — State: IL — Zip Code: 60572

Purpose of Disbursement: Telephone Service
Candidate Name

Category/ Type: 001

Office Sought: [ ] House [ ] Senate [ ] President — State: — District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19581
Date of Disbursement: 01 / 25 / 2006

Amount of Each Disbursement this Period: 71.81

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address PO Box 8229

City: Aurora — State: IL — Zip Code: 60572

Purpose of Disbursement: Telephone Service
Candidate Name

Category/ Type: 001

Office Sought: [ ] House [ ] Senate [ ] President — State: — District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19583
Date of Disbursement: 01 / 25 / 2006

Amount of Each Disbursement this Period: 65.59

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 137.40

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

25021361956

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Cingular Wireless

Mailing Address PO Box 8229

City: Aurora | State: IL | Zip Code: 60572

Purpose of Disbursement: Telephone Service
Candidate Name:

Category/ Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19584
Date of Disbursement: 01 / 25 / 2006

Amount of Each Disbursement this Period: 209.82

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address PO Box 8229

City: Aurora | State: IL | Zip Code: 60572

Purpose of Disbursement: Telephone Service
Candidate Name:

Category/ Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19636
Date of Disbursement: 02 / 24 / 2006

Amount of Each Disbursement this Period: 68.21

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address PO Box 8229

City: Aurora | State: IL | Zip Code: 60572

Purpose of Disbursement: Telephone Service
Candidate Name:

Category/ Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19637
Date of Disbursement: 02 / 24 / 2006

Amount of Each Disbursement this Period: 65.64

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	343.47
TOTAL This Period (last page this line number only) ▶	

26020191564

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) PAGE 41 / 53

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Cingular Wireless

Mailing Address PO Box 8229

City: Aurora | State: IL | Zip Code: 60572

Purpose of Disbursement: Telephone Service

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

001 Category/ Type

Transaction ID: SB17.19638
Date of Disbursement: 02 / 24 / 2006

Amount of Each Disbursement this Period: 209.62

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address PO Box 8229

City: Aurora | State: IL | Zip Code: 60572

Purpose of Disbursement: Telephone Service

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

001 Category/ Type

Transaction ID: SB17.19829
Date of Disbursement: 03 / 23 / 2006

Amount of Each Disbursement this Period: 65.64

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address PO Box 8229

City: Aurora | State: IL | Zip Code: 60572

Purpose of Disbursement: Telephone Service

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

001 Category/ Type

Transaction ID: SB17.19830
Date of Disbursement: 03 / 23 / 2006

Amount of Each Disbursement this Period: 210.12

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 485.38

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

26020181365

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Comcast Cable Comm.

Mailing Address PO Box 173885

City: Comcast | State: CO | Zip Code: 80217

Purpose of Disbursement: Internet service

Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President | State: | District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19576
Date of Disbursement: 01 / 09 / 2006

Amount of Each Disbursement this Period: 55.95

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
DEMOCRATIC PARTY OF OREGON

Mailing Address 232 NE 9th Ave. Suite 105

City: Portland | State: OR | Zip Code: 97232

Purpose of Disbursement: Rent

Candidate Name: DEMOCRATIC PARTY OF OREGON

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President | State: | District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19573
Date of Disbursement: 01 / 03 / 2006

Amount of Each Disbursement this Period: 403.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
DEMOCRATIC PARTY OF OREGON

Mailing Address 232 NE 9th Ave. Suite 105

City: Portland | State: OR | Zip Code: 97232

Purpose of Disbursement: Rent

Candidate Name: DEMOCRATIC PARTY OF OREGON

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President | State: | District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19630
Date of Disbursement: 02 / 06 / 2006

Amount of Each Disbursement this Period: 403.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 861.95

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

25020161366

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

PAGE 43 / 53

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
DEMOCRATIC PARTY OF OREGON

Mailing Address 232 NE 9th Ave.
Suite 105

City: Portland | State: OR | Zip Code: 97232

Purpose of Disbursement: Rent

Candidate Name: DEMOCRATIC PARTY OF OREGON

Office Sought: [ ] House [ ] Senate [ ] President | State: | District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Category/Type: D01

Transaction ID: SB17.19644

Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 403.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 2911 NE Hancock

City: Portland | State: OR | Zip Code: 97212

Purpose of Disbursement: reimbursement for telephone/internet svc

Candidate Name:

Office Sought: [ ] House [ ] Senate [ ] President | State: | District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Category/Type: D01

Transaction ID: SB17.19571

Date of Disbursement: 01 / 03 / 2006

Amount of Each Disbursement this Period: 102.21

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 2911 NE Hancock

City: Portland | State: OR | Zip Code: 97212

Purpose of Disbursement: Salary

Candidate Name:

Office Sought: [ ] House [ ] Senate [ ] President | State: | District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Category/Type: D01

Transaction ID: SB17.19617

Date of Disbursement: 01 / 13 / 2006

Amount of Each Disbursement this Period: 748.70

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1253.91

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

26020613367

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
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[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Kardon, Melissa

Mailing Address 2911 NE Hancock

City: Portland | State: OR | Zip Code: 97212

Purpose of Disbursement: Salary
Candidate Name

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19620
Date of Disbursement: 01 / 31 / 2006

Amount of Each Disbursement this Period: 748.70

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 2911 NE Hancock

City: Portland | State: OR | Zip Code: 97212

Purpose of Disbursement: Office Supply Reimbursement
Candidate Name

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19629
Date of Disbursement: 02 / 01 / 2006

Amount of Each Disbursement this Period: 102.42

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 2911 NE Hancock

City: Portland | State: OR | Zip Code: 97212

Purpose of Disbursement: Internet/Phone Reimbursement
Candidate Name

001 Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19631
Date of Disbursement: 02 / 06 / 2006

Amount of Each Disbursement this Period: 136.86

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 987.98

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

26020191358

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Kardon, Melissa

Mailing Address 2911 NE Hancock

City: Portland | State: OR | Zip Code: 97212

Purpose of Disbursement: Accounting Consultant
Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19634
Date of Disbursement: 02 / 14 / 2006

Amount of Each Disbursement this Period: 498.70

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 2911 NE Hancock

City: Portland | State: OR | Zip Code: 97212

Purpose of Disbursement: Accounting Consultant
Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19642
Date of Disbursement: 02 / 28 / 2006

Amount of Each Disbursement this Period: 623.70

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

G. Full Name (Last, First, Middle Initial)
Kardon, Melissa

Mailing Address 2911 NE Hancock

City: Portland | State: OR | Zip Code: 97212

Purpose of Disbursement: Accounting Consultant
Candidate Name

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19711
Date of Disbursement: 03 / 15 / 2006

Amount of Each Disbursement this Period: 498.70

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1621.10

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

26021137659

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) — PAGE 46 / 53

[X] 17 [ ] 18 [ ] 19a [ ] 19b [ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Kardon, Melissa

Mailing Address 2911 NE Hancock

City: Portland — State: OR — Zip Code: 97212

Purpose of Disbursement: Internet/Phone Reimbursement
Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President — State: — District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19713
Date of Disbursement: 03 / 15 / 2006

Amount of Each Disbursement this Period: 254.22

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 2911 NE Hancock

City: Portland — State: OR — Zip Code: 97212

Purpose of Disbursement: Accounting Consultant
Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President — State: — District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19819
Date of Disbursement: 03 / 31 / 2006

Amount of Each Disbursement this Period: 488.70

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 937 NE Webster

City: Portland — State: OR — Zip Code: 97211

Purpose of Disbursement: Computer Consultant
Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President — State: — District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19580
Date of Disbursement: 01 / 10 / 2006

Amount of Each Disbursement this Period: 400.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1152.92

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

26020613570

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) — PAGE 47 / 53

[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Mandate Media

Mailing Address 937 NE Webster

City: Portland — State: OR — Zip Code: 97211

Purpose of Disbursement: Computer Consultant
Candidate Name:

Transaction ID: SB17.19714
Date of Disbursement: 03 / 17 / 2006

Amount of Each Disbursement this Period: 2060.00

001 Category/ Type

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

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

Mailing Address 4684 SE Johnson Creek Boulevard

City: Portland — State: OR — Zip Code: 97222

Purpose of Disbursement: Computer Networking
Candidate Name:

Transaction ID: SB17.19707
Date of Disbursement: 03 / 10 / 2006

Amount of Each Disbursement this Period: 348.75

001 Category/ Type

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

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

Mailing Address PO Box 3498

City: Portland — State: OR — Zip Code: 97208

Purpose of Disbursement: Travel Expense Reimbursement
Candidate Name:

Transaction ID: SB17.19574
Date of Disbursement: 01 / 03 / 2006

Amount of Each Disbursement this Period: 182.25

002 Category/ Type

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

SUBTOTAL of Disbursements This Page (optional) ▶ 2591.00

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

26020136773

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Ron Wyden

Mailing Address PO Box 3498

City: Portland | State: OR | Zip Code: 97208

Purpose of Disbursement: Travel Expense Reimbursement
Candidate Name:

Category/Type: 002

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19575
Date of Disbursement: 01 / 07 / 2006

Amount of Each Disbursement this Period: 215.55

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 400 High Street SE

City: Salem | State: OR | Zip Code: 97312

Purpose of Disbursement: Workers Compensation
Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19837
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 430.92

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address PO Box 152406

City: Irvine | State: TX | Zip Code: 75015

Purpose of Disbursement: Telephone Service
Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General [ ] Other (specify)

Transaction ID: SB17.19582
Date of Disbursement: 01 / 25 / 2006

Amount of Each Disbursement this Period: 28.66

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 675.13

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

26020613172

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
Tyree, Jocelyn

Mailing Address 2803 SE 27th

City: Portland | State: OR | Zip Code: 97202

Purpose of Disbursement: Salary
Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19712
Date of Disbursement: 03 / 15 / 2006

Amount of Each Disbursement this Period: 605.09

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 2803 SE 27th

City: Portland | State: OR | Zip Code: 97202

Purpose of Disbursement: Salary
Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19818
Date of Disbursement: 03 / 31 / 2006

Amount of Each Disbursement this Period: 605.09

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address PO Box 650580

City: Dallas | State: TX | Zip Code: 75265

Purpose of Disbursement: Shipping
Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: SB17.19579
Date of Disbursement: 01 / 10 / 2006

Amount of Each Disbursement this Period: 44.72

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1254.90

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

26020181375

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one) PAGE 51 / 53

[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

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

Mailing Address PO Box 650580

City: Dallas | State: TX | Zip Code: 75265

Purpose of Disbursement: Shipping

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

001 Category/ Type

Transaction ID: SB17.19828

Date of Disbursement: 03 / 23 / 2006

Amount of Each Disbursement this Period: 21.83

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 815 NW Hoyt

City: Portland | State: OR | Zip Code: 97208

Purpose of Disbursement: Box Rental

Candidate Name

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

001 Category/ Type

Transaction ID: SB17.19845

Date of Disbursement: 03 / 03 / 2006

Amount of Each Disbursement this Period: 144.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	165.83
TOTAL This Period (last page this line number only) ▶	25993.61

26020613774

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☒ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Wyden for Senate

A. Full Name (Last, First, Middle Initial)
FRESENIUS MEDICAL CARE NORTH AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 1875 EYE STREET NW 12TH FLOOR

City WASHINGTON | State DC | Zip Code 20006

Purpose of Disbursement
Requested Refund

Candidate Name

010
Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify)

Transaction ID: SB20C.19836
Date of Disbursement 02 / 14 / 2006

Amount of Each Disbursement this Period
900.00

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	900.00

25020181375

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

PAGE 53 / 53

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NAME OF COMMITTEE (In Full)
Wyden for Senate

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

Mailing Address 120 Maryland

City: Washington | State: DC | Zip Code: 20002

Purpose of Disbursement
Unlimited Transfer to the DSCC

Candidate Name
DSCC

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify)

011 Category/ Type

Transaction ID: SB21.19820
Date of Disbursement: 03 / 31 / 2006

Amount of Each Disbursement this Period: 150000.00

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
NARAL Pro-Choice Oregon

Mailing Address PO Box 40472

City: Portland | State: OR | Zip Code: 97240

Purpose of Disbursement
Event Tickets

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify)

011 Category/ Type

Transaction ID: SB21.19715
Date of Disbursement: 03 / 28 / 2006

Amount of Each Disbursement this Period: 2250.00

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 152250.00

TOTAL This Period (last page this line number only) ▶ 152250.00

01913776

EMILY J. REYNOLDS
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

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