

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		9089.32
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	10316.36									
(c) Total Receipts (from Line 19)	37040.62	145836.26								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	47356.98	154925.58								
7. Total Disbursements (from Line 31)	35536.90	143105.50								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	11820.08	11820.08								
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)	143387.90									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	3350.00	22926.00
(i) Itemized (use Schedule A)	23788.00	92850.50
(ii) Unitemized	27138.00	115776.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1500.00	1500.00
(b) Political Party Committees	0.00	5300.00
(c) Other Political Committees (such as PACs)	28638.00	122576.50
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	414.61
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	8402.62	22845.15
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	8402.62	22845.15
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	37040.62	145836.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	28638.00	122991.11

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	1879.40	8710.39
(ii) Non-Federal Share.....	10649.94	49358.83
(b) Other Federal Operating Expenditures.....	14150.95	47946.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	26680.29	106016.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	8856.61	37089.38
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	8856.61	37089.38
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	35536.90	143105.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24886.96	93746.67

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	28638.00	122576.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28638.00	122576.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	16030.35	56657.29
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	414.61
38. Net Operating Expenditures (subtract Line 37 from Line 36)	16030.35	56242.68

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: SL1

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

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	10.75	53.75
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	10.75	53.75
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	819.25	862.25
8. RECEIPTS..... (from Line 3)	0.00	0.00
9. SUBTOTAL..... (Add Lines 7 and 8)	819.25	862.25
10. DISBURSEMENTS..... (From Line 6)	10.75	53.75
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	808.50	808.50

**SCHEDULE L-B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
OF LEVIN FUNDS**

Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)		PAGE 7 / 36
	<input type="checkbox"/> 4a	<input type="checkbox"/> 4c	<input checked="" type="checkbox"/> 5
	<input type="checkbox"/> 4b	<input type="checkbox"/> 4d	

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) / Full Organization Name Oregon Republican Party	Transaction ID: 4B80930.E12643 Date of Disbursement
	Mailing Address c/o Key Bank Levin Account 1500 Edgewater St NW	<input type="text" value="05"/> <input type="text" value="31"/> / <input type="text" value="2006"/>
	City State Zip Code Salem OR 97302	Amount of Each Disbursement this Period <input type="text" value="10.75"/>
	Purpose of Disbursement Bank Fee	Account: 8

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="10.75"/>
TOTAL This Period (last page this line number only)	<input type="text" value="10.75"/>

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

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

FOR LINE NUMBER: PAGE 8 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Knute Buehler

Mailing Address 1122 NW Foxwood Pl

City State Zip Code
Bend OR 97701-8606

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

Name of Employer
Orthopedic Center for the Casc

Occupation
Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	0	/	2	0	0	6

Transaction ID: 81129.C99926

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address PO Box 640

City State Zip Code
Pleasant Hill OR 97455-0640

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

Name of Employer
Chambers Communication Co-
rp.

Occupation
CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	3	/	2	0	0	6

Transaction ID: 81129.C99747

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 35200 SW Deer Park Road

City State Zip Code
Wilsonville OR 97070-9509

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

Name of Employer
Gaylord Industries

Occupation
Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	6

Transaction ID: 81129.C99967

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Dixie Harrison		Date of Receipt
	Mailing Address 29179 Spencer Creek Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 0 3 / 2 0 0 6
	City	State	Zip Code
	Eugene	OR	97405
	FEC ID number of contributing federal political committee. C		Transaction ID: 81129.C99780
Name of Employer Information Requested		Occupation requested	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
			Receipt

B.	Full Name (Last, First, Middle Initial) Timothy Hunt		Date of Receipt
	Mailing Address 324 Dutton Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 0 8 / 2 0 0 6
	City	State	Zip Code
	Eagle Point	OR	97524
	FEC ID number of contributing federal political committee. C		Transaction ID: 81129.C99865
Name of Employer Self		Occupation Trucking Service	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
			Receipt

C.	Full Name (Last, First, Middle Initial) Eliot Jenkins		Date of Receipt
	Mailing Address 13169 SE River Rd Apt 307T		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 0 1 / 2 0 0 6
	City	State	Zip Code
	Portland	OR	97222-9789
	FEC ID number of contributing federal political committee. C		Transaction ID: 81129.C99448
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00
			Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 950.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Mike Tyrholm	Date of Receipt MM / DD / YYYY 05 / 08 / 2006
	Mailing Address 3703 Collier Ln	Transaction ID: 81129.C99855
	City State Zip Code Klamath Falls OR 97603-9644	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) Frank Warren	Date of Receipt MM / DD / YYYY 05 / 20 / 2006
	Mailing Address 4025 SW Nehalem Ct.	Transaction ID: 81129.C100004
	City State Zip Code Portland OR 97201	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Nancy Wendt	Date of Receipt MM / DD / YYYY 05 / 01 / 2006
	Mailing Address 826 Loma Linda Dr.	Transaction ID: 81129.C99495
	City State Zip Code Klamath Falls OR 97601	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Homemaker Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	1550.00
TOTAL This Period (last page this line number only)	3350.00

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

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

FOR LINE NUMBER: PAGE 11 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Oregon Federation of College Republicans

Mailing Address PO Box 808

City State Zip Code
Corvallis OR 97339-0808

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 9 / 2 0 0 6

Transaction ID: 81129.C99889

Amount of Each Receipt this Period
750.00

Receipt

B. Full Name (Last, First, Middle Initial)
Oregon Federation of College Republicans

Mailing Address PO Box 808

City State Zip Code
Corvallis OR 97339-0808

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 9 / 2 0 0 6

Transaction ID: 81129.C99890

Amount of Each Receipt this Period
750.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

TOTAL This Period (last page this line number only) ► **1500.00**

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 36

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

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc Mailing Address 12450 Automobile Boulevard City Clearwater State FL Zip Code 34622- Purpose of Disbursement List Management Service OGOP Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80930.E15073 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 6
	Amount of Each Disbursement this Period 1000.00 LIST MANAGEMENT SERVICE OGOP

B. Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc Mailing Address 12450 Automobile Boulevard City Clearwater State FL Zip Code 34622- Purpose of Disbursement List Management Service OGOP Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80930.E15074 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6
	Amount of Each Disbursement this Period 1000.00 LIST MANAGEMENT SERVICE OGOP

C. Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc Mailing Address 12450 Automobile Boulevard City Clearwater State FL Zip Code 34622- Purpose of Disbursement List Management Service OGOP Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80930.E15075 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
	Amount of Each Disbursement this Period 1000.00 LIST MANAGEMENT SERVICE OGOP

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Donnelley Marketing Inc.	Transaction ID: 81127.E16038 Date of Disbursement 05 / 19 / 2006
	Mailing Address 311 W Monroe Str 7th Fl	Amount of Each Disbursement this Period 10000.00
	City Chicago State IL Zip Code 60694-	
	Purpose of Disbursement List Management Service OGOP	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		LIST MANAGEMENT SERVICE OGOP

B.	Full Name (Last, First, Middle Initial) Amy Langdon	Transaction ID: 81127.E16012 Date of Disbursement 05 / 17 / 2006
	Mailing Address 2830 Foxhaven Dr SE	Amount of Each Disbursement this Period 813.76
	City Salem State OR Zip Code 97306-2526	
	Purpose of Disbursement Phone Expense/Food	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PHONE EXPENSE/FOOD

C.	Full Name (Last, First, Middle Initial) LifeWise	Transaction ID: 81127.E16028 Date of Disbursement 05 / 03 / 2006
	Mailing Address 815 SW Bond St	Amount of Each Disbursement this Period 297.20
	City Bend State OR Zip Code 97702-	
	Purpose of Disbursement Insurance	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		INSURANCE

SUBTOTAL of Disbursements This Page (optional)	▶	11110.96
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 14 / 36

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

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)
Belinda Smith

Mailing Address 687 SW Concord Way

City State Zip Code
Beaverton OR 97006-

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81127.E16040

Date of Disbursement

05 / 17 / 2006

Amount of Each Disbursement this Period

39.99

OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

39.99

TOTAL This Period (last page this line number only)

14150.95

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 36

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

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Amy Langdon Mailing Address 2830 Foxhaven Dr SE City Salem State OR Zip Code 97306-2526 Purpose of Disbursement FEA payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80930.E12153 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	Amount of Each Disbursement this Period 2291.95 FEA PAYROLL
B.	Full Name (Last, First, Middle Initial) Amy Langdon Mailing Address 2830 Foxhaven Dr SE City Salem State OR Zip Code 97306-2526 Purpose of Disbursement FEA payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80930.E12154 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	Amount of Each Disbursement this Period 2291.94 FEA PAYROLL
C.	Full Name (Last, First, Middle Initial) Kelsey Schmidt Mailing Address 1794 SW Fellows St Apt 8 City McMinnville State OR Zip Code 97128-7318 Purpose of Disbursement FEA Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81127.E16017 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 6	Amount of Each Disbursement this Period 170.18 FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)	4754.07
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Kelsey Schmidt	Transaction ID: 81127.E16018 Date of Disbursement 05 / 15 / 2006
	Mailing Address 1794 SW Fellows St Apt 8	
	City McMinnville State OR Zip Code 97128-7318	Amount of Each Disbursement this Period 149.73
	Purpose of Disbursement FEA Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

B.	Full Name (Last, First, Middle Initial) Belinda Smith	Transaction ID: 81127.E16015 Date of Disbursement 05 / 01 / 2006
	Mailing Address 687 SW Concord Way	
	City Beaverton State OR Zip Code 97006-	Amount of Each Disbursement this Period 516.61
	Purpose of Disbursement FEA Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

C.	Full Name (Last, First, Middle Initial) Belinda Smith	Transaction ID: 81127.E16016 Date of Disbursement 05 / 15 / 2006
	Mailing Address 687 SW Concord Way	
	City Beaverton State OR Zip Code 97006-	Amount of Each Disbursement this Period 516.62
	Purpose of Disbursement FEA Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)	▶	1182.96
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 36

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

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) Cindy Taylor	Transaction ID: 80930.E12165 Date of Disbursement 05 / 01 / 2006
	Mailing Address 595 Rockwood St SE	
	City Salem State OR Zip Code 97306-1756	Amount of Each Disbursement this Period 947.52
	Purpose of Disbursement FEA payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

B.	Full Name (Last, First, Middle Initial) Cindy Taylor	Transaction ID: 80930.E12166 Date of Disbursement 05 / 15 / 2006
	Mailing Address 595 Rockwood St SE	
	City Salem State OR Zip Code 97306-1756	Amount of Each Disbursement this Period 947.50
	Purpose of Disbursement FEA payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

C.	Full Name (Last, First, Middle Initial) David Taylor	Transaction ID: 80930.E12173 Date of Disbursement 05 / 15 / 2006
	Mailing Address 595 Rockwood St SE	
	City Salem State OR Zip Code 97306-1756	Amount of Each Disbursement this Period 508.59
	Purpose of Disbursement FEA payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)	2403.61
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 36

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

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) David Taylor		Transaction ID: 81127.E16034	
	Mailing Address 595 Rockwood St SE		Date of Disbursement 05 / 31 / 2006	
City Salem		State OR	Zip Code 97306-1756	
Purpose of Disbursement FEA Payroll		Category/ Type		Amount of Each Disbursement this Period 515.97
Candidate Name		Disbursement For:		FEA PAYROLL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				

SUBTOTAL of Disbursements This Page (optional)	515.97
TOTAL This Period (last page this line number only)	8856.61

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 19 / 36
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle	Nature of Debt (Purpose): Computer Support	
Mailing Address 205 Pennsylvania Ave SE		
City Washington State DC ZIP Code 20003-		

Outstanding Balance Beginning This Period 1950.00	Transaction ID: LS80930.E9875	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1950.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect	Nature of Debt (Purpose): Fundraising Phone Calls OGOP	
Mailing Address 7320 N Dreamy Draw Dr		
City Phoenix State AZ ZIP Code 85020-5212		

Outstanding Balance Beginning This Period 21811.30	Transaction ID: LS80930.E9436	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 21811.30

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

Outstanding Balance Beginning This Period 18631.72	Transaction ID: LS80930.E15073	
Amount Incurred This Period 0.00	Payment This Period 3000.00	Outstanding Balance at Close of This Period 15631.72

1) SUBTOTALS This Period This Page (optional).....	▶	39393.02
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 20 / 36
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Donnelley Marketing Inc.	Nature of Debt (Purpose): List Management Service OGOP
Mailing Address 311 W Monroe Str 7th Fl	
City State ZIP Code Chicago IL 60694-	

Outstanding Balance Beginning This Period 18418.87	Transaction ID: LS81127.E16038	
Amount Incurred This Period 0.00	Payment This Period 10000.00	Outstanding Balance at Close of This Period 8418.87

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor United States Treasury	Nature of Debt (Purpose): FEA Payroll Taxes
Mailing Address US Department of Treasury	
City State ZIP Code Ogden UT 84403-	

Outstanding Balance Beginning This Period 8255.68	Transaction ID: LS81215.E16396	
Amount Incurred This Period 2131.47	Payment This Period 0.00	Outstanding Balance at Close of This Period 10387.15

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Office Depot**	Nature of Debt (Purpose): Office Supplies
Mailing Address 2945 Liberty St S	
City State ZIP Code Salem OR 97306-	

Outstanding Balance Beginning This Period 112.23	Transaction ID: LS81205.E16192	
Amount Incurred This Period 255.46	Payment This Period 0.00	Outstanding Balance at Close of This Period 367.69

1) SUBTOTALS This Period This Page (optional).....	▶	19173.71
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Oregon Department of Revenue			Nature of Debt (Purpose): FEA Payroll Taxes
Mailing Address P.O. Box 14800			
City Salem	State OR	ZIP Code 97309-0920	

Outstanding Balance Beginning This Period <input type="text" value="3483.20"/>		Transaction ID: LS81215.E16383	
Amount Incurred This Period <input type="text" value="677.95"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4161.15"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Donna Woolley			Nature of Debt (Purpose): Contribution Refund
Mailing Address PO Box 43			
City Drain	State OR	ZIP Code 97435-0043	

Outstanding Balance Beginning This Period <input type="text" value="4000.00"/>		Transaction ID: LS81117.E15765	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4000.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Computer Village			Nature of Debt (Purpose): Computer Support
Mailing Address 4075 76th Ave NE			
City Salem	State OR	ZIP Code 97305-	

Outstanding Balance Beginning This Period <input type="text" value="535.02"/>		Transaction ID: LS81127.E16037	
Amount Incurred This Period <input type="text" value="225.00"/>	Payment This Period <input type="text" value="535.02"/>	Outstanding Balance at Close of This Period <input type="text" value="225.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="8386.15"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Joan Austin			Nature of Debt (Purpose): Contribution Refund
Mailing Address PO Box 209			
City Newberg	State OR	ZIP Code 97132-0209	

Outstanding Balance Beginning This Period <input type="text" value="2500.00"/>		Transaction ID: LS81116.E15755	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2500.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Certified Property			Nature of Debt (Purpose): Rent
Mailing Address PO Box 269			
City Salem	State OR	ZIP Code 97308-0269	

Outstanding Balance Beginning This Period <input type="text" value="3076.20"/>		Transaction ID: LS81127.E16032	
Amount Incurred This Period <input type="text" value="6076.20"/>	Payment This Period <input type="text" value="5576.20"/>	Outstanding Balance at Close of This Period <input type="text" value="3576.20"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: LS81205.E16194	
Amount Incurred This Period <input type="text" value="304.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="304.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="6380.20"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Eagle Teleconferencing			Nature of Debt (Purpose): Phone Service
Mailing Address 207 West Washington Street			
City	State	ZIP Code	
Rushville	IL	62681-	

Outstanding Balance Beginning This Period		Transaction ID: LS81205.E16199	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
298.81	0.00	298.81	

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

Outstanding Balance Beginning This Period		Transaction ID: LS80930.E11336	
67180.90			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	67180.90	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Integra Telecom			Nature of Debt (Purpose): Phone Service
Mailing Address PO Box 34988			
City	State	ZIP Code	
Seattle	WA	98124-1988	

Outstanding Balance Beginning This Period		Transaction ID: LS81205.E16200	
650.07			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
653.88	0.00	1303.95	

1) SUBTOTALS This Period This Page (optional).....	▶	68783.66
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ricoh Customer Finance Corp.			Nature of Debt (Purpose): Equipment Lease
Mailing Address PO Box 310010273			
City Pasadena	State CA	ZIP Code 91110-0001	

Outstanding Balance Beginning This Period <input type="text" value="754.25"/>		Transaction ID: LS81127.E16039	
Amount Incurred This Period <input type="text" value="93.00"/>	Payment This Period <input type="text" value="248.09"/>	Outstanding Balance at Close of This Period <input type="text" value="599.16"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cardinal Communication			Nature of Debt (Purpose): Phone Service
Mailing Address 925 University Ave Ste A			
City Sacramento	State CA	ZIP Code 95825-6709	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: LS81205.E16197	
Amount Incurred This Period <input type="text" value="172.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="172.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Oregon Federation of College Republicans			Nature of Debt (Purpose): Contribution Refund
Mailing Address PO Box 808			
City Corvallis	State OR	ZIP Code 97339-0808	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: LS81213.E16374	
Amount Incurred This Period <input type="text" value="500.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="500.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1271.16"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 25 / 36
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Salem Conference Center			Nature of Debt (Purpose): Facility Rental/Food/Beverage OGOP
Mailing Address 200 Commercial St SE			
City Salem	State OR	ZIP Code 97301-	

Outstanding Balance Beginning This Period		Transaction ID: LS81127.E16036	
4684.60			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	4684.60	0.00	

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	143387.90
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	143387.90

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Oregon Republican Party

NAME OF ACCOUNT OREGON FEDERAL 1706 F-Key c/o Key Bank	DATE OF RECEIPT M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 2670.22
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	2670.22	Transaction ID: H381129.C99962
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Oregon Republican Party

NAME OF ACCOUNT OREGON FEDERAL 1706 F-Key c/o Key Bank	DATE OF RECEIPT M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 2550.00
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	2550.00	Transaction ID: H381129.C99976
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Oregon Republican Party

NAME OF ACCOUNT OREGON FEDERAL 1706 F-Key c/o Key Bank	DATE OF RECEIPT M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 2614.60
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative		2614.60 Transaction ID: H381129.C99977
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____	Transaction ID:	
b) _____	Transaction ID:	
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____	Transaction ID:	
b) _____	Transaction ID:	
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 Oregon Republican Party

NAME OF ACCOUNT OREGON FEDERAL 1706 F-Key c/o Key Bank	DATE OF RECEIPT M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 567.80
--	---	------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative		567.80 Transaction ID: H381129.C100056
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		
		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative)	8402.62
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	8402.62

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Amy Langdon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 2830 Foxhaven Dr SE			Allocated Activity or Event Year-To-Date 57569.63																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: H481127.E16013			M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	2	2	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	5	/	2	2	/	2	0	0	6																
Salem	OR	97306-2526																							
Purpose of Disbursement: Expense Reimbursement: See Below			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 4111																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.20		567.80		668.00

B. Full Name (Last, First, Middle Initial) Dell Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address One Dell Way			Allocated Activity or Event Year-To-Date 668.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: H481127.E16014			M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	2	2	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	5	/	2	2	/	2	0	0	6																
Round Rock	TX	78682-																							
Purpose of Disbursement: Equipment Purchase			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 4111 [MEMO ITEM] Equipment Purchase																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.20		567.80		668.00

C. Full Name (Last, First, Middle Initial) CTS Holdings LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address c/o Key Bank 1500 Edgewater St NW			Allocated Activity or Event Year-To-Date 45541.28																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: H481127.E16019			M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	1	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	5	/	0	1	/	2	0	0	6																
Salem	OR	97304-																							
Purpose of Disbursement: Credit Card Fee			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 4111																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.21		1.19		1.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
100.41		568.99		669.40

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) CTS Holdings LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address c/o Key Bank 1500 Edgewater St NW			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px;">45860.97</div>																		
City State Zip Code Salem OR 97304-	<div style="border: 1px solid black; width: 40px; height: 20px; margin-left: auto;"></div> Category/ Type		Date <table border="1" style="display: inline-table;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>5</td></tr></table> / <table border="1" style="display: inline-table;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>9</td></tr></table> / <table border="1" style="display: inline-table;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	0	5	D	D	0	9	Y	Y	Y	Y	2	0	0	6
M	M																				
0	5																				
D	D																				
0	9																				
Y	Y	Y	Y																		
2	0	0	6																		
Purpose of Disbursement: Credit Card Fee			Transaction ID: H481127.E16020																		
Activity or Event Identifier: ADMINISTRATION B 4111																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">1.50</div>		<div style="border: 1px solid black; padding: 2px;">8.50</div>		<div style="border: 1px solid black; padding: 2px;">10.00</div>

B. Full Name (Last, First, Middle Initial) CTS Holdings LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address c/o Key Bank 1500 Edgewater St NW			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px;">45863.51</div>																		
City State Zip Code Salem OR 97304-	<div style="border: 1px solid black; width: 40px; height: 20px; margin-left: auto;"></div> Category/ Type		Date <table border="1" style="display: inline-table;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>5</td></tr></table> / <table border="1" style="display: inline-table;"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>0</td></tr></table> / <table border="1" style="display: inline-table;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	0	5	D	D	1	0	Y	Y	Y	Y	2	0	0	6
M	M																				
0	5																				
D	D																				
1	0																				
Y	Y	Y	Y																		
2	0	0	6																		
Purpose of Disbursement: Credit Card Fee			Transaction ID: H481127.E16021																		
Activity or Event Identifier: ADMINISTRATION B 4111																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">0.38</div>		<div style="border: 1px solid black; padding: 2px;">2.16</div>		<div style="border: 1px solid black; padding: 2px;">2.54</div>

C. Full Name (Last, First, Middle Initial) CTS Holdings LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address c/o Key Bank 1500 Edgewater St NW			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px;">54161.63</div>																		
City State Zip Code Salem OR 97304-	<div style="border: 1px solid black; width: 40px; height: 20px; margin-left: auto;"></div> Category/ Type		Date <table border="1" style="display: inline-table;"><tr><td>M</td><td>M</td></tr><tr><td>0</td><td>5</td></tr></table> / <table border="1" style="display: inline-table;"><tr><td>D</td><td>D</td></tr><tr><td>1</td><td>6</td></tr></table> / <table border="1" style="display: inline-table;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	0	5	D	D	1	6	Y	Y	Y	Y	2	0	0	6
M	M																				
0	5																				
D	D																				
1	6																				
Y	Y	Y	Y																		
2	0	0	6																		
Purpose of Disbursement: Credit Card Fee			Transaction ID: H481127.E16022																		
Activity or Event Identifier: ADMINISTRATION B 4111																					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">0.35</div>		<div style="border: 1px solid black; padding: 2px;">1.95</div>		<div style="border: 1px solid black; padding: 2px;">2.30</div>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">2.23</div>		<div style="border: 1px solid black; padding: 2px;">12.61</div>		<div style="border: 1px solid black; padding: 2px;">14.84</div>

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

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

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Pitney Bowes Credit Corp			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P. O. Box 85460			Allocated Activity or Event Year-To-Date 45787.97																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	2	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	5	/	0	2	/	2	0	0	6																
Louisville	KY	40285-5460	Transaction ID: H481127.E16023																						
Purpose of Disbursement: Equipment Lease			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 4111																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.00		209.69		246.69

B. Full Name (Last, First, Middle Initial) Pitney Bowes Credit Corp			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P. O. Box 85460			Allocated Activity or Event Year-To-Date 54401.63																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	1	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	5	/	0	1	/	2	0	0	6																
Louisville	KY	40285-5460	Transaction ID: H481127.E16024																						
Purpose of Disbursement: Equipment Lease			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 4111																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.00		204.00		240.00

C. Full Name (Last, First, Middle Initial) Pitney Bowes Credit Corp			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address P. O. Box 85460			Allocated Activity or Event Year-To-Date 57809.63																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	2	6	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	5	/	2	6	/	2	0	0	6																
Louisville	KY	40285-5460	Transaction ID: H481127.E16025																						
Purpose of Disbursement: Equipment Lease			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 4111																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.00		204.00		240.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.00		617.69		726.69

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Discover Corporate Card

Mailing Address
PO Box 30423

City State Zip Code
Salt Lake City UT 84130-0423

Purpose of Disbursement:
Credit Card Fee

Category/
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

45807.97

Activity or Event Identifier:
ADMINISTRATION B 4111

Date 05 / 02 / 2006

Transaction ID: H481127.E16026

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.00		17.00		20.00

B. Full Name (Last, First, Middle Initial)
Authnet Gateway Billing

Mailing Address
293 Boston Post Rd W Ste 220

City State Zip Code
Marlborough MA 01752-

Purpose of Disbursement:
Credit Card Fee

Category/
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

45817.97

Activity or Event Identifier:
ADMINISTRATION B 4111

Date 05 / 02 / 2006

Transaction ID: H481127.E16027

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.50		8.50		10.00

C. Full Name (Last, First, Middle Initial)
Key Bank**

Mailing Address
1500 Edgewater St NW

City State Zip Code
Salem OR 97304-

Purpose of Disbursement:
Bank Fee

Category/
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

45850.97

Activity or Event Identifier:
ADMINISTRATION B 4111

Date 05 / 05 / 2006

Transaction ID: H481127.E16029

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.95		28.05		33.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.45		53.55		63.00

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Key Bank**			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1500 Edgewater St NW			Allocated Activity or Event Year-To-Date 58065.72																						
City Salem	State OR	Zip Code 97304-	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	3	1	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	5	/	3	1	/	2	0	0	6																
Purpose of Disbursement: Bank Fee			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 4111			Transaction ID: H481127.E16030																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.20		6.80		8.00

B. Full Name (Last, First, Middle Initial) Key Bank**			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1500 Edgewater St NW			Allocated Activity or Event Year-To-Date 58069.22																						
City Salem	State OR	Zip Code 97304-	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	3	1	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	5	/	3	1	/	2	0	0	6																
Purpose of Disbursement: Bank Fee			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 4111			Transaction ID: H481127.E16031																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.53		2.97		3.50

C. Full Name (Last, First, Middle Initial) Certified Property			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 269			Allocated Activity or Event Year-To-Date 49474.73																						
City Salem	State OR	Zip Code 97308-0269	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	1	5	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	5	/	1	5	/	2	0	0	6																
Purpose of Disbursement: Rent			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 4111			Transaction ID: H481127.E16032																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
461.43		2614.77		3076.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
463.16		2624.54		3087.70

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Certified Property			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 269			Allocated Activity or Event Year-To-Date 56901.63		
City State Zip Code Salem OR 97308-0269	Category/ Type		Date M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 6		
Purpose of Disbursement: Rent			Transaction ID: H481127.E16033		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
375.00		2125.00		2500.00

B. Full Name (Last, First, Middle Initial) Salem Conference Center			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 200 Commercial St SE			Allocated Activity or Event Year-To-Date 54159.33		
City State Zip Code Salem OR 97301-	Category/ Type		Date M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6		
Purpose of Disbursement: Facility Rental/Food/Beverage GOP			Transaction ID: H481127.E16036		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
702.69		3981.91		4684.60

C. Full Name (Last, First, Middle Initial) Computer Village			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4075 76th Ave NE			Allocated Activity or Event Year-To-Date 46398.53		
City State Zip Code Salem OR 97305-	Category/ Type		Date M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 6		
Purpose of Disbursement: Computer Support			Transaction ID: H481127.E16037		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
80.25		454.77		535.02

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1157.94		6561.68		7719.62

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Ricoh Customer Finance Corp.

Mailing Address
PO Box 310010273

City State Zip Code
Pasadena CA 91110-0001

Purpose of Disbursement:
Equipment Lease

Category/
Type

Type of Allocated Activity:

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

Allocated Activity or Event Year-To-Date

58057.72

Activity or Event Identifier:
ADMINISTRATION B 4111

Date 05 / 26 / 2006

Transaction ID: H481127.E16039

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.21		210.88		248.09

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.21		210.88		248.09

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
1879.40	10649.94	12529.34