

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼**

Example: If typing, type over the lines.

12FE4M5

CALLAHAN FOR OREGON

ADDRESS (number and street) ▼

PO BOX 4352



Check if different than previously reported. (ACC)

SALEM

OR

97302

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00548115

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

OR

00

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

M M / D D / Y Y Y Y

in the State of

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

10

D D / Y Y Y Y

01

Y Y Y Y

2013

through

M M / D D / Y Y Y Y

12

D D / Y Y Y Y

31

Y Y Y Y

2013

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 MARK ALLEN CALLAHAN

Signature of Treasurer MARK ALLEN CALLAHAN

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01

D D / Y Y Y Y

31

Y Y Y Y

2014

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)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

CALLAHAN FOR OREGON

Report Covering the Period:

From:

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

To:

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

	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(e))....	8830.00	9514.54
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	8830.00	9514.54
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5580.41	6264.94
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	5580.41	6264.94
8. Cash on Hand at Close of Reporting Period (from Line 27)	3249.60	
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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

CALLAHAN FOR OREGON

Report Covering the Period:

From:

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

To:

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

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).....

500.00

500.00

(ii) Unitemized.....

1330.00

1440.00

(iii) TOTAL of contributions from individuals ▶

1830.00

1940.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

7000.00

7574.54

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

8830.00

9514.54

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

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.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

8830.00

9514.54

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5580.41	6264.94
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)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	5580.41	6264.94

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8830.00
25. SUBTOTAL (add Line 23 and Line 24).....	8830.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5580.41
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3249.60

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

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

FOR LINE NUMBER:

PAGE 5 OF 8

(check only one)

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

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)

CALLAHAN FOR OREGON

Full Name (Last, First, Middle Initial)

A. Joseph Henry

Mailing Address 1347 Ewald Ave SE

City
SalemState
ORZip Code
97302FEC ID number of contributing
federal political committee.

C

Name of Employer
Oregon Health AuthorityOccupation
Systems Analyst

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2013

Transaction ID : SA11Al.4347

Amount of Each Receipt this Period

500.00

Campaign Contribution

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

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

Amount of Each Receipt this Period

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

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

500.00

500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 8

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

CALLAHAN FOR OREGON

Full Name (Last, First, Middle Initial)

A. Daniel Clopton

Mailing Address P.O. Box 7442

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2013

City	State	Zip Code
Springfield	OR	97475

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Campaign Manager Consultant Fee

001

Transaction ID : SB17.4290

Candidate Name

CALLAHAN FOR OREGONCategory/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: OR District: 00

Full Name (Last, First, Middle Initial)

B. Daniel Clopton

Mailing Address P.O. Box 7442

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		26		2013

City	State	Zip Code
Springfield	OR	97475

Amount of Each Disbursement this Period

1100.00

Purpose of Disbursement
Campaign Manager Consulting Fee

001

Transaction ID : SB17.4288

Candidate Name

CALLAHAN FOR OREGONCategory/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: OR District: 00

Full Name (Last, First, Middle Initial)

C. Political Innovations

Mailing Address P.O. Box 1902

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		26		2013

City	State	Zip Code
Spring	TX	77383

Amount of Each Disbursement this Period

900.00

Purpose of Disbursement
Website Re-Design/Development

004

Transaction ID : SB17.4335

Candidate Name

CALLAHAN FOR OREGONCategory/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: OR District: 00

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

3000.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 8

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

CALLAHAN FOR OREGON

Full Name (Last, First, Middle Initial)

A. Vistaprint.com

Mailing Address 95 Hayden Avenue

City	State	Zip Code
Lexington	MA	02421

Purpose of Disbursement
Campaign materials - Mini car door magnets, bumper stickers and business cards

Candidate Name

CALLAHAN FOR OREGON

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: OR District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2013

Amount of Each Disbursement this Period

93.44

Transaction ID : SB17.4188

B. Vistaprint.com

Mailing Address 95 Hayden Avenue

City	State	Zip Code
Lexington	MA	02421

Purpose of Disbursement
Campaign business cards - 1000ct

Candidate Name

CALLAHAN FOR OREGON

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: OR District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		29		2013

Amount of Each Disbursement this Period

57.22

Transaction ID : SB17.4244

c. Vistaprint.com

Mailing Address 95 Hayden Avenue

City	State	Zip Code
Lexington	MA	02421

Purpose of Disbursement
Campaign sign, business cards, and car door magnets

Candidate Name

CALLAHAN FOR OREGON

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: OR District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2013

Amount of Each Disbursement this Period

169.35

Transaction ID : SB17.4364

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

320.01

3320.01