

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		9089.32
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	79654.08									
(c) Total Receipts (from Line 19)	49411.45	340129.85								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	129065.53	349219.17								
7. Total Disbursements (from Line 31)	35411.30	255564.94								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	93654.23	93654.23								
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)	179214.40									

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	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	36012.45	139416.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	13399.00	146947.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	49411.45	286363.50
(b) Political Party Committees	0.00	1550.00
(c) Other Political Committees (such as PACs)	0.00	7300.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	49411.45	295213.50
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)	0.00	44501.74
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	44501.74
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	49411.45	340129.85
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	49411.45	295628.11

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.....	1920.39	13702.14
(ii) Non-Federal Share.....	10882.17	77645.22
(b) Other Federal Operating Expenditures.....	3507.65	78398.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	16310.21	169746.23
22. Transfers to Affiliated/Other Party Committees.....	8043.61	9243.61
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	500.00
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.....	900.00	900.00
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	9657.48	75175.10
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	9657.48	75175.10
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	35411.30	255564.94
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24529.13	177919.72

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)	49411.45	295213.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	49411.45	295213.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5428.04	92101.01
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	414.61
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5428.04	91686.40

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	96.75
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	10.75	96.75
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	776.25	862.25
8. RECEIPTS..... (from Line 3)	0.00	0.00
9. SUBTOTAL..... (Add Lines 7 and 8)	776.25	862.25
10. DISBURSEMENTS..... (From Line 6)	10.75	96.75
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	765.50	765.50

**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 / 39
	<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.E12647 Date of Disbursement
	Mailing Address c/o Key Bank Levin Account 1500 Edgewater St NW	<input type="text" value="09"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="06"/>
	City State Zip Code Salem OR 97302	Amount of Each Disbursement this Period <input type="text" value="10.75"/>
	Purpose of Disbursement Bank fees	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: (check only one)	PAGE 8 / 39
	<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) James E. Anderson		Date of Receipt
	Mailing Address 1526 SW Meteor PI		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	Troutdale	OR	97060-5427
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Retired		Occupation Retired	Transaction ID: 80930.C97119
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="360.00"/>	<input type="text" value="35.00"/>
Receipt			

B.	Full Name (Last, First, Middle Initial) Mike Bonetto		Date of Receipt
	Mailing Address 19547 Sunshine Way		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	Bend	OR	97702
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Clear Choice Health Plans		Occupation Health Insurance Agent	Transaction ID: 81202.C100613
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>	<input type="text" value="500.00"/>
Receipt			

C.	Full Name (Last, First, Middle Initial) Norman Brenden		Date of Receipt
	Mailing Address 12344 Paradise Alley Rd NE		<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2006"/>
	City	State	Zip Code
	Silverton	OR	97381-9369
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Harvest Development		Occupation Senior VP	Transaction ID: 80930.C87775
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>	<input type="text" value="5000.00"/>
Receipt			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="5535.00"/>
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 9 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A.	Full Name (Last, First, Middle Initial) William Colson	Date of Receipt MM / DD / YYYY 09 / 14 / 2006
	Mailing Address PO Box 14111	Transaction ID: 80930.C87776
	City State Zip Code Salem OR 97309	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Self Occupation Investor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 5000.00	

B.	Full Name (Last, First, Middle Initial) David Coutin	Date of Receipt MM / DD / YYYY 09 / 27 / 2006
	Mailing Address 19474 Green Lakes Loop	Transaction ID: 81202.C100598
	City State Zip Code Bend OR 97702-1160	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Self Occupation Doctor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 539.00	

C.	Full Name (Last, First, Middle Initial) James Curran	Date of Receipt MM / DD / YYYY 09 / 25 / 2006
	Mailing Address 19239 Green Lakes Loop	Transaction ID: 80930.C87852
	City State Zip Code Bend OR 97702-1171	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional)	5750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 39
(check only one)

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

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)
Matt Cyrus

Mailing Address 16925 Green Drake Ct

City State Zip Code
Sisters OR 97759-9617

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

Name of Employer Occupation
Aspen Investments, LLC managing partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 27 / 2006

Transaction ID: 81202.C100599

Amount of Each Receipt this Period
1050.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Matt Cyrus

Mailing Address 16925 Green Drake Ct

City State Zip Code
Sisters OR 97759-9617

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

Name of Employer Occupation
Aspen Investments, LLC managing partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1880.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 27 / 2006

Transaction ID: 81202.C100600

Amount of Each Receipt this Period
830.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Kathryn Daniels

Mailing Address PO Box 6520

City State Zip Code
Brookings OR 97415-0282

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 13 / 2006

Transaction ID: 80930.C87771

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 2130.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 39
(check only one)

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

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 Dewey

Mailing Address 22085 Neff Rd

City Bend State OR Zip Code 97701-7900

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 27 / 2006
Transaction ID: 81202.C100601
 Amount of Each Receipt this Period 380.00
 Receipt

B.

Full Name (Last, First, Middle Initial)
David Dewey

Mailing Address 22085 Neff Rd

City Bend State OR Zip Code 97701-7900

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 09 / 27 / 2006
Transaction ID: 81202.C100608
 Amount of Each Receipt this Period 100.00
 Receipt

C.

Full Name (Last, First, Middle Initial)
Warren G. Foote

Mailing Address 532 Stagecoach Way SE

City Salem State OR Zip Code 97302-3925

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

Name of Employer Oregon Dept of Justice Occupation Dept. Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.78

Date of Receipt 09 / 19 / 2006
Transaction ID: 80930.C87833
 Amount of Each Receipt this Period 31.78
 Receipt

SUBTOTAL of Receipts This Page (optional) ► **511.78**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 39
(check only one)

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

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) John Fuller		Date of Receipt MM / DD / YYYY 09 / 27 / 2006
Mailing Address 2277 NW Putnam Road		Transaction ID: 81202.C100602
City Bend	State OR	Zip Code 97701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
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) R. Stevens Howard		Date of Receipt MM / DD / YYYY 09 / 27 / 2006
Mailing Address PO Box 1048		Transaction ID: 81202.C100609
City Bend	State OR	Zip Code 97702
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 425.00
Name of Employer Stevens Howard Publishing	Occupation Owner	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

C.

Full Name (Last, First, Middle Initial) Wallace G. Iverson		Date of Receipt MM / DD / YYYY 09 / 08 / 2006
Mailing Address 717 Murphy Rd		Transaction ID: 80930.C87661
City Medford	State OR	Zip Code 97504-8425
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10110.61
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10110.61	

SUBTOTAL of Receipts This Page (optional)	▶	10735.61
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 39
	<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) Wallace G. Iverson	Date of Receipt MM / DD / YYYY 09 / 08 / 2006
	Mailing Address 717 Murphy Rd	Transaction ID: 81214.C100811
	City State Zip Code Medford OR 97504-8425	Amount of Each Receipt this Period -110.61
	FEC ID number of contributing federal political committee. C	Redesignation TO Memo [MEMO ITEM]
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10110.61	

B.	Full Name (Last, First, Middle Initial) Timothy Knopp	Date of Receipt MM / DD / YYYY 09 / 27 / 2006
	Mailing Address PO Box 6145	Transaction ID: 81202.C100606
	City State Zip Code Bend OR 97708-6145	Amount of Each Receipt this Period 850.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Langenwalter Dye concept	Occupation Business Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

C.	Full Name (Last, First, Middle Initial) Timothy Knopp	Date of Receipt MM / DD / YYYY 09 / 27 / 2006
	Mailing Address PO Box 6145	Transaction ID: 81202.C100605
	City State Zip Code Bend OR 97708-6145	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Langenwalter Dye concept	Occupation Business Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 895.00	

SUBTOTAL of Receipts This Page (optional)	895.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 14 / 39
(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)
Jerry Lausmann
Mailing Address PO Box 1608
City Medford State OR Zip Code 97501-0246
FEC ID number of contributing federal political committee. **C**
Name of Employer Kogap Lumber Occupation Land & timber management
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 09 / 05 / 2006
Transaction ID: 80930.C87640
Amount of Each Receipt this Period 200.00
Receipt

B. Full Name (Last, First, Middle Initial)
Nancy Lecklider
Mailing Address 3054 NW Clubhouse Dr
City Bend State OR Zip Code 97701-7538
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 09 / 27 / 2006
Transaction ID: 81202.C100618
Amount of Each Receipt this Period 100.00
Receipt

C. Full Name (Last, First, Middle Initial)
Robert McNitt
Mailing Address 40823 Huntley Rd SE
City Stayton State OR Zip Code 97383-9712
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 09 / 18 / 2006
Transaction ID: 80930.C87813
Amount of Each Receipt this Period 300.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 600.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 39
(check only one)

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

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) Anthony Pappas		Date of Receipt MM / DD / YYYY 09 / 08 / 2006
Mailing Address 1926 W Burnside St Unit 1219		Transaction ID: 80930.C87868
City Portland	State OR	Zip Code 97209-2080
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Willamette Valley Radiology	Occupation Radiologist	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) Mark Porter		Date of Receipt MM / DD / YYYY 09 / 27 / 2006
Mailing Address		Transaction ID: 81202.C100616
City Bend	State OR	Zip Code 97702
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 510.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

C.

Full Name (Last, First, Middle Initial) James Russell		Date of Receipt MM / DD / YYYY 09 / 08 / 2006
Mailing Address 1820 NE 104th Ave Apt 66		Transaction ID: 80930.C87863
City Portland	State OR	Zip Code 97220-3819
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	1410.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 16 / 39
(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)
Lawrence M. Smith

Mailing Address 7778 SW Green Valley Ter

City State Zip Code
Portland OR 97225-1568

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

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	3	/	2	0	0	6

Transaction ID: 80930.C87772

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Lawrence M. Smith

Mailing Address 7778 SW Green Valley Ter

City State Zip Code
Portland OR 97225-1568

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

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	6

Transaction ID: 80930.C87779

Amount of Each Receipt this Period
100.00

Receipt

C. Full Name (Last, First, Middle Initial)
Stephen Snipes

Mailing Address PO Box 590
410 Siletz View Lane

City State Zip Code
Gleneden Beach OR 97388-0590

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

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	6	/	2	0	0	6

Transaction ID: 80930.C87648

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **300.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 39
(check only one)

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

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)
Peter Stott

Mailing Address 2896 SW Patton Road

City Portland State OR Zip Code 97204-3701

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

Name of Employer Crown Pacific Occupation President & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 21 / 2006

Transaction ID: 80930.C87906

Amount of Each Receipt this Period 5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Lynda Truitt

Mailing Address 3595 Cherokee Dr S

City Salem State OR Zip Code 97302-9712

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2006

Transaction ID: 80930.C87839

Amount of Each Receipt this Period 250.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Scott Waters

Mailing Address 60491 Tall Pine Ave

City Bend State OR Zip Code 97702-9439

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

Name of Employer Caprock Occupation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 09 / 27 / 2006

Transaction ID: 81202.C100620

Amount of Each Receipt this Period 100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 5350.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 18 / 39	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 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) Jay Woodworth		Date of Receipt	
	Mailing Address 2090 Ridge Pointe Dr		M M / D D / Y Y Y Y 09 / 01 / 2006	
	City	State	Zip Code	Transaction ID: 80930.C87625
	Lake Oswego	OR	97034-7572	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		C	2795.06
	Name of Employer Real Estate Solutions Inc.		Occupation Broker	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	3637.61	

SUBTOTAL of Receipts This Page (optional)	▶	2795.06
TOTAL This Period (last page this line number only)	▶	36012.45

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) Direct Mail Systems, Inc <hr/> Mailing Address 12450 Automobile Boulevard <hr/> City Clearwater State FL Zip Code 34622- <hr/> Purpose of Disbursement List Management Service OGOP Candidate Name <hr/> 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.E12206 Date of Disbursement 09 / 08 / 2006 <hr/> Amount of Each Disbursement this Period 1000.00 <hr/> LIST MANAGEMENT SERVICE OGOP
B.	Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc <hr/> Mailing Address 12450 Automobile Boulevard <hr/> City Clearwater State FL Zip Code 34622- <hr/> Purpose of Disbursement List Management Service OGOP Candidate Name <hr/> 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.E12207 Date of Disbursement 09 / 15 / 2006 <hr/> Amount of Each Disbursement this Period 831.45 <hr/> LIST MANAGEMENT SERVICE OGOP
C.	Full Name (Last, First, Middle Initial) FLS Connect <hr/> Mailing Address 7320 N Dreamy Draw Dr <hr/> City Phoenix State AZ Zip Code 85020-5212 <hr/> Purpose of Disbursement Fundraising Phone Calls OGOP Candidate Name <hr/> 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.E12215 Date of Disbursement 09 / 25 / 2006 <hr/> Amount of Each Disbursement this Period 397.50 <hr/> FUNDRAISING PHONE CALLS OGOP

SUBTOTAL of Disbursements This Page (optional) ▶	2228.95
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 20 / 39

<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)
FLS Connect

Transaction ID: 80930.E12217
Date of Disbursement

Mailing Address 7320 N Dreamy Draw Dr

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

City Phoenix State AZ Zip Code 85020-5212

Amount of Each Disbursement this Period

Purpose of Disbursement
Fundraising Phone Calls OGOP

Category/
Type

207.50

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

FUNDRAISING PHONE CALLS
OGOP

State: District:

B.

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

Transaction ID: 80930.E12216
Date of Disbursement

Mailing Address 7320 N Dreamy Draw Dr

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

City Phoenix State AZ Zip Code 85020-5212

Amount of Each Disbursement this Period

Purpose of Disbursement
Fundraising Phone Calls OGOP

Category/
Type

290.00

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

FUNDRAISING PHONE CALLS
OGOP

State: District:

C.

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

Transaction ID: 80930.E12212
Date of Disbursement

Mailing Address 1500 Edgewater St NW

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	6

City Salem State OR Zip Code 97304-

Amount of Each Disbursement this Period

Purpose of Disbursement
1120pol income taxes

Category/
Type

114.00

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

1120POL INCOME TAXES

State: District:

SUBTOTAL of Disbursements This Page (optional)

611.50

TOTAL This Period (last page this line number only)

--

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 21 / 39

<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)
LifeWise

Mailing Address 815 SW Bond St

City Bend State OR Zip Code 97702-

Purpose of Disbursement
Insurance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80930.E12205
Date of Disbursement

09 / 07 / 2006

Amount of Each Disbursement this Period

297.20

INSURANCE

B.

Full Name (Last, First, Middle Initial)
U.S. Postmaster

Mailing Address 410 Mill St SE

City Salem State OR Zip Code 97301-

Purpose of Disbursement
Postage OGOP

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80930.E12204
Date of Disbursement

09 / 07 / 2006

Amount of Each Disbursement this Period

160.00

POSTAGE OGOP

C.

Full Name (Last, First, Middle Initial)
Verizon Directories Corporation

Mailing Address PO Box 612727

City San Antonio State TX Zip Code 78261-2727

Purpose of Disbursement
Printing OGOP

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80930.E12214
Date of Disbursement

09 / 17 / 2006

Amount of Each Disbursement this Period

210.00

PRINTING OGOP

SUBTOTAL of Disbursements This Page (optional) ▶

667.20

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

3507.65

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 22 / 39

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

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)
Multnomah County Central Comm#336

Mailing Address 3423 SE Henry Street

City Portland State OR Zip Code 97202-

Purpose of Disbursement
Transfer

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80930.E12221
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Deschutes County Republicans

Mailing Address PO Box 5265

City Bend State OR Zip Code 97708-

Purpose of Disbursement
Transfer

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81129.E16100
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
Deschutes County Republicans

Mailing Address PO Box 5265

City Bend State OR Zip Code 97708-

Purpose of Disbursement
Transfer

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 81129.E16101
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Bruce Broussard for Oregon

Transaction ID: 80930.E12225

Date of Disbursement

Mailing Address 1521 N. Jantzen #208

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	6

City State Zip Code
Portland OR 97217-

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
CONTRIBUTION

--

Category/
Type

Candidate Name
HEBERT BRUCE BROUSSARD

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: OR District: 03

CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ►

500.00

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

500.00

**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 24 / 39

<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 checked="" 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)
Federal Election Commission

Mailing Address PO Box 979058

City State Zip Code
Saint Louis MO 63197-0001

Purpose of Disbursement
CONCILIATION PAYMENT

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80930.E12224

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 25 / 39

<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	Transaction ID: 80930.E12190 Date of Disbursement 09 / 01 / 2006
	Mailing Address 2830 Foxhaven Dr SE	
	City Salem State OR Zip Code 97306-2526	Amount of Each Disbursement this Period 2291.96
	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) Amy Langdon	Transaction ID: 80930.E12191 Date of Disbursement 09 / 15 / 2006
	Mailing Address 2830 Foxhaven Dr SE	
	City Salem State OR Zip Code 97306-2526	Amount of Each Disbursement this Period 2291.95
	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) Kelsey Schmidt	Transaction ID: 80930.E12192 Date of Disbursement 09 / 01 / 2006
	Mailing Address 1794 SW Fellows St Apt 8	
	City McMinnville State OR Zip Code 97128-7318	Amount of Each Disbursement this Period 664.66
	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)	▶	5248.57
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 26 / 39

<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

<p>A. Full Name (Last, First, Middle Initial) Kelsey Schmidt</p> <p>Mailing Address 1794 SW Fellows St Apt 8</p> <p>City McMinnville State OR Zip Code 97128-7318</p> <p>Purpose of Disbursement FEA payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80930.E12201</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="109.62"/></p> <p>FEA PAYROLL</p>
<p>B. Full Name (Last, First, Middle Initial) Belinda Smith</p> <p>Mailing Address 687 SW Concord Way</p> <p>City Beaverton State OR Zip Code 97006-</p> <p>Purpose of Disbursement FEA payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80930.E12193</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="516.61"/></p> <p>FEA PAYROLL</p>
<p>C. Full Name (Last, First, Middle Initial) Belinda Smith</p> <p>Mailing Address 687 SW Concord Way</p> <p>City Beaverton State OR Zip Code 97006-</p> <p>Purpose of Disbursement FEA payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80930.E12194</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="516.62"/></p> <p>FEA PAYROLL</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 27 / 39

<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 Mailing Address 595 Rockwood St SE City Salem State OR Zip Code 97306-1756 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.E12197 Date of Disbursement 09 / 01 / 2006	Amount of Each Disbursement this Period 947.52 FEA PAYROLL
B.	Full Name (Last, First, Middle Initial) Cindy Taylor Mailing Address 595 Rockwood St SE City Salem State OR Zip Code 97306-1756 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.E12198 Date of Disbursement 09 / 15 / 2006	Amount of Each Disbursement this Period 947.51 FEA PAYROLL
C.	Full Name (Last, First, Middle Initial) David Taylor Mailing Address 595 Rockwood St SE City Salem State OR Zip Code 97306-1756 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.E12195 Date of Disbursement 09 / 01 / 2006	Amount of Each Disbursement this Period 751.87 FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶	2646.90
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 28 / 39

<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

Mailing Address 595 Rockwood St SE

City State Zip Code
Salem OR 97306-1756

Purpose of Disbursement
FEA payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80930.E12196

Date of Disbursement

09 / 15 / 2006

Amount of Each Disbursement this Period

619.16

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶

619.16

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

9657.48

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 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		Transaction ID: LS80930.E12211	
3900.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
1950.00	1950.00	3900.00	

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		Transaction ID: LS80930.E12215	
21811.30			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
895.00	895.00	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		Transaction ID: LS80930.E12206	
17419.35			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
3571.59	1831.45	19159.49	

1) SUBTOTALS This Period This Page (optional).....	▶	44870.79
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 30 / 39
	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 Services OGOP
Mailing Address 311 W Monroe Str 7th Fl	
City State ZIP Code Chicago IL 60694-	

Outstanding Balance Beginning This Period 8418.87	Transaction ID: LS81205.E16189	
Amount Incurred This Period 0.00	Payment This Period 0.00	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 19524.92	Transaction ID: LS81215.E16400	
Amount Incurred This Period 2735.82	Payment This Period 0.00	Outstanding Balance at Close of This Period 22260.74

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 306.70	Transaction ID: LS80930.E12131	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 306.70

1) SUBTOTALS This Period This Page (optional).....	▶	30986.31
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
Mailing Address P.O. Box 14800			
City Salem	State OR	ZIP Code 97309-0920	

Outstanding Balance Beginning This Period <input type="text" value="7219.23"/>		Transaction ID: LS81215.E16387	
Amount Incurred This Period <input type="text" value="885.13"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="8104.36"/>	

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: LS81116.E15762	
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="300.00"/>		Transaction ID: LS80930.E11467	
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="300.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="12404.36"/>
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 32 / 39
	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 Joan Austin	Nature of Debt (Purpose): Contribution Refund
Mailing Address PO Box 209	
City State ZIP Code Newberg OR 97132-0209	

Outstanding Balance Beginning This Period 2500.00	Transaction ID: LS81116.E15760	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 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 State ZIP Code Salem OR 97308-0269	

Outstanding Balance Beginning This Period 18533.74	Transaction ID: LS80930.E12209	
Amount Incurred This Period 6122.58	Payment This Period 6076.20	Outstanding Balance at Close of This Period 18580.12

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Stafford Studios	Nature of Debt (Purpose): Web Service
Mailing Address 11594 SE Meadowgold Place	
City State ZIP Code Clackamas OR 97015-	

Outstanding Balance Beginning This Period 200.00	Transaction ID: LS80930.E12210	
Amount Incurred This Period 0.00	Payment This Period 200.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	21080.12
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 Capitol Accounting Service			Nature of Debt (Purpose): Compliance Consulting
Mailing Address PO Box 1304			
City Silverton	State OR	ZIP Code 97381-	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: LS81207.E16220	
Amount Incurred This Period <input type="text" value="160.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="160.00"/>	

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 Los Angeles	State CA	ZIP Code 90030-	

Outstanding Balance Beginning This Period <input type="text" value="67180.90"/>		Transaction ID: LS80930.E11336	
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="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 Seattle	State WA	ZIP Code 98124-1988	

Outstanding Balance Beginning This Period <input type="text" value="1305.59"/>		Transaction ID: LS80930.E12213	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="653.36"/>	Outstanding Balance at Close of This Period <input type="text" value="652.23"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="67993.13"/>
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 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="318.00"/>		Transaction ID: LS80930.E12218	
Amount Incurred This Period <input type="text" value="311.71"/>	Payment This Period <input type="text" value="318.00"/>	Outstanding Balance at Close of This Period <input type="text" value="311.71"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Discover Corporate Card			Nature of Debt (Purpose): Travel/office supplies
Mailing Address PO Box 30423			
City Salt Lake City	State UT	ZIP Code 84130-0423	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: LS81207.E16223	
Amount Incurred This Period <input type="text" value="1017.98"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1017.98"/>	

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="550.00"/>		Transaction ID: LS81213.E16374	
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="550.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1879.69"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="179214.40"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="179214.40"/>

**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

Mailing Address
P. O. Box 85460

City	State	Zip Code
Louisville	KY	40285-5460

Purpose of Disbursement:
Equipment Lease

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 4111

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

85422.50

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	2	/	2	0	0	6

Transaction ID: H480930.E12199

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.03		85.14		100.17

B. Full Name (Last, First, Middle Initial)
Pitney Bowes Credit Corp

Mailing Address
P. O. Box 85460

City	State	Zip Code
Louisville	KY	40285-5460

Purpose of Disbursement:
Equipment Lease

Category/
Type

Activity or Event Identifier:
ADMINISTRATION B 4111

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

79026.13

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	6	/	2	0	0	6

Transaction ID: H480930.E12200

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.72		242.08		284.80

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

Activity or Event Identifier:
ADMINISTRATION B 4111

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

91347.36

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	6

Transaction ID: H480930.E12202

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.53		2.97		3.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
58.28		330.19		388.47

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 85122.33		
City Salem	State OR	Zip Code 97308-0269	Date M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6		
Purpose of Disbursement: Rent			Transaction ID: H480930.E12209		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
911.43		5164.77		6076.20

B. Full Name (Last, First, Middle Initial) Stafford Studios			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 11594 SE Meadowgold Place			Allocated Activity or Event Year-To-Date 85322.33		
City Clackamas	State OR	Zip Code 97015-	Date M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6		
Purpose of Disbursement: Web Service			Transaction ID: H480930.E12210		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.00		170.00		200.00

C. Full Name (Last, First, Middle Initial) Aristotle			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 205 Pennsylvania Ave SE			Allocated Activity or Event Year-To-Date 87872.50		
City Washington	State DC	Zip Code 20003-	Date M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6		
Purpose of Disbursement: Computer Support			Transaction ID: H480930.E12211		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
292.50		1657.50		1950.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1233.93		6992.27		8226.20

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

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

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Integra Telecom			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 34988			Allocated Activity or Event Year-To-Date 88525.86		
City Seattle	State WA	Zip Code 98124-1988	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Phone Service			Transaction ID: H480930.E12213		
Activity or Event Identifier: ADMINISTRATION B 4111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
98.00		555.36		653.36

B. Full Name (Last, First, Middle Initial) Ricoh Customer Finance 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 PO Box 310010273			Allocated Activity or Event Year-To-Date 91343.86		
City Pasadena	State CA	Zip Code 91110-0001	Date <input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Equipment Lease			Transaction ID: H480930.E12218		
Activity or Event Identifier: ADMINISTRATION B 4111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.70		270.30		318.00

C. Full Name (Last, First, Middle Initial) Command Consulting			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 678			Allocated Activity or Event Year-To-Date 91025.86		
City Salem	State OR	Zip Code 97302-	Date <input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Strategic Consulting			Transaction ID: H480930.E12227		
Activity or Event Identifier: ADMINISTRATION B 4111					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
375.00		2125.00		2500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
520.70		2950.66		3471.36

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			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 30423			Allocated Activity or Event Year-To-Date 78741.33		
City	State	Zip Code	Category/Type		
Salt Lake City	UT	84130-0423			
Purpose of Disbursement: Credit Card Fee					
Activity or Event Identifier: ADMINISTRATION B 4111			Date <input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/> Transaction ID: H481128.E16091		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
29.48		167.05		196.53

B. Full Name (Last, First, Middle Initial) Authnet Gateway Billing			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 293 Boston Post Rd W Ste 220			Allocated Activity or Event Year-To-Date 79046.13		
City	State	Zip Code	Category/Type		
Marlborough	MA	01752-			
Purpose of Disbursement: Credit Card Fee					
Activity or Event Identifier: ADMINISTRATION B 4111			Date <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2006"/> Transaction ID: H481128.E16092		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.50		8.50		10.00

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 79036.13		
City	State	Zip Code	Category/Type		
Salem	OR	97304-			
Purpose of Disbursement: Credit Card Fee					
Activity or Event Identifier: ADMINISTRATION B 4111			Date <input type="text" value="09"/> / <input type="text" value="06"/> / <input type="text" value="2006"/> Transaction ID: H481128.E16093		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.50		8.50		10.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.48		184.05		216.53

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

85922.50

Activity or Event Identifier:
ADMINISTRATION B 4111

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	2	/	2	0	0	6

Transaction ID: H481128.E16094

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.00		425.00		500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
75.00		425.00		500.00

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
1920.39	10882.17	12802.56