

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

12 JAN 30 PM 1:55

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Oregon-Virginia Fund

ADDRESS (number and street)

426 C St NE

Check if different than previously reported. (ACC)

Washington

DC

20002

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00501387

3. IS THIS REPORT



NEW (N) OR



AMENDED (A)

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

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY
10 / 01 / 2011

MM / DD / YYYY
12 / 31 / 2011

through

MM / DD / YYYY
12 / 31 / 2011

MM / DD / YYYY
01 / 29 / 2012

MM / DD / YYYY
01 / 29 / 2012

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 Judith Zamore

Signature of Treasurer

Judith Zamore

Judith Zamore

Date

MM / DD / YYYY
01 / 29 / 2012

MM / DD / YYYY
01 / 29 / 2012

MM / DD / YYYY
01 / 29 / 2012

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)

12020050415

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 12

Write or Type Committee Name
Oregon-Virginia Fund

Report Covering the Period: From:

/
 /

To:

/
 /

	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))....	23000.00	23000.00
(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)).....	23000.00	23000.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1638.25	1638.25
(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)).....	1638.25	1638.25
8. Cash on Hand at Close of Reporting Period (from Line 27).....	25.00	
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

12020050416

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 12

Write or Type Committee Name

Oregon-Virginia Fund

Report Covering the Period: From:

M	M
10	

 /

D	D
01	

 /

Y	Y	Y	Y	Y
2011				

 To:

M	M
12	

 /

D	D
31	

 /

Y	Y	Y	Y	Y
2011				

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).....

20300.00

20300.00

(ii) Unitemized.....

200.00

200.00

(iii) TOTAL of contributions from individuals ▶

20500.00

20500.00

(b) Political Party Committees.....

0.00

0.00

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

2500.00

2500.00

(d) The Candidate.....

0.00

0.00

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

23000.00

23000.00

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)..... ▶

23000.00

23000.00

12020050417

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1638.25	1638.25
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	21336.75	21336.75
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) ►	22975.00	22975.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	23000.00
25. SUBTOTAL (add Line 23 and Line 24).....	23000.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	22975.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	25.00

12020050418

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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-Virginia Fund

A. Full Name (Last, First, Middle Initial)
William Chang

Mailing Address 50 Selby Ln

City Atherton State CA Zip Code 94027

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

Name of Employer Westlake International Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 MM / DD / YYYY
 11 / 02 / 2011

Transaction ID : SA11AI.4115

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Thomas R. Denison

Mailing Address 170 Sidney Gay Dr

City Newport Coast State CA Zip Code 92657

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

Name of Employer RNS Capital Partners Occupation Private Equity

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 MM / DD / YYYY
 11 / 09 / 2011

Transaction ID : SA11AI.4117

Amount of Each Receipt this Period
 2500.00

Earmarked through ActBlue

C. Full Name (Last, First, Middle Initial)
Gary D. Dillabough

Mailing Address 363 Stockbridge Ave

City Atherton State CA Zip Code 94027

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

Name of Employer Steve Westly Group Occupation Venture Capitalist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 MM / DD / YYYY
 11 / 21 / 2011

Transaction ID : SA11AI.4127

Amount of Each Receipt this Period
 1000.00

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

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

4500.00

12020050419

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 OF 12		
	(check only one)	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Oregon-Virginia Fund

A. Full Name (Last, First, Middle Initial)
Michael C. Dorsey

Mailing Address 550 Albion Ave

City Woodside State CA Zip Code 94062

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

Name of Employer The Westly Group Occupation Managing Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
11 / 02 / 2011

Transaction ID : SA11AI.4113

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Roger D. Follis

Mailing Address 1 Embarcadero Ctr Suite 4100

City San Francisco State CA Zip Code 94111

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

Name of Employer Self Occupation Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
11 / 21 / 2011

Transaction ID : SA11AI.4123

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Carol E. Henton

Mailing Address 1752 Parrott Dr

City San Mateo State CA Zip Code 94402

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

Name of Employer TechAmerica Occupation Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
12 / 28 / 2011

Transaction ID : SA11AI.4136

Amount of Each Receipt this Period
50.00

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

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

6050.00

12020050420

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 12
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Oregon-Virginia Fund

A. Full Name (Last, First, Middle Initial)
Ta-Lin Hsu

Mailing Address 97 Isabella Ave

City Atherton State CA Zip Code 94027

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

Name of Employer H&Q Asia Pacific Occupation Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
MM / DD / YYYY
11 / 09 / 2011

Transaction ID : SA11AI.4119

Amount of Each Receipt this Period
1000.00

Earmarked through ActBlue

B. Full Name (Last, First, Middle Initial)
Ross A. Jaffe

Mailing Address 8 Meadow Ln

City Atherton State CA Zip Code 94027

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

Name of Employer Versant Ventures Occupation Venture Capitalist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2011

Transaction ID : SA11AI.4111

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Chris Larsen

Mailing Address 2621 Larkin St

City San Francisco State CA Zip Code 94109

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

Name of Employer Prosper Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
MM / DD / YYYY
11 / 10 / 2011

Transaction ID : SA11AI.4121

Amount of Each Receipt this Period
1000.00

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

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

4000.00

12020030421

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 12			
	(check only one)	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
		<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Oregon-Virginia Fund

Full Name (Last, First, Middle Initial) Craig Lewis		Date of Receipt MM / DD / YYYY 11 / 21 / 2011
Mailing Address 16 Palm Ct		Transaction ID : SA11AI.4129
City Menlo Park	State CA	Zip Code 94025
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2000.00	
Name of Employer Self	Occupation Executive	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) Michael C. Orsak		Date of Receipt MM / DD / YYYY 11 / 02 / 2011
Mailing Address 1125 San Mateo Dr		Transaction ID : SA11AI.4109
City Menlo Park	State CA	Zip Code 94025
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Worldview Techology Partners	Occupation General Partner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) Kevin M. Richards		Date of Receipt MM / DD / YYYY 12 / 02 / 2011
Mailing Address 435 First St SE		Transaction ID : SA11AI.4131
City Washington	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1750.00	
Name of Employer TechAmerica	Occupation Government Affairs	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1750.00	

SUBTOTAL of Receipts This Page (optional).....	4750.00
TOTAL This Period (last page this line number only).....	

12020050422

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

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

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NAME OF COMMITTEE (In Full)
Oregon-Virginia Fund

Full Name (Last, First, Middle Initial) Steven Westly		Date of Receipt MM / DD / YYYY 11 / 21 / 2011
A. Mailing Address 42 Ridge View Dr		Transaction ID : SA11AI.4125
City Atherton	State CA	Zip Code 94027
FEC ID number of contributing federal political committee.	<input type="checkbox"/> C	Amount of Each Receipt this Period 1000.00
Name of Employer Steve Westly Group	Occupation Managing Partner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial)		Date of Receipt
B. Mailing Address		MM / DD / YYYY
City	State	Zip Code
FEC ID number of contributing federal political committee.	<input type="checkbox"/> C	Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial)		Date of Receipt
C. Mailing Address		MM / DD / YYYY
City	State	Zip Code
FEC ID number of contributing federal political committee.	<input type="checkbox"/> C	Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	20300.00

12020050423

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

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

FOR LINE NUMBER: PAGE 10 OF 12

(check only one)

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

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NAME OF COMMITTEE (In Full)
Oregon-Virginia Fund

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

Mailing Address **P.O. BOX 382110**

City **CAMBRIDGE** State **MA** Zip Code **02238**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
MM / DD / YYYY
11 / 09 / 2011

Transaction ID : SA11C.4138

Amount of Each Receipt this Period
3500.00

Contributions earmarked through ActBlue; not a contribution
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
TECHNOLOGY ASSOCIATION OF AMERICA'S NET POLITICAL ACTION COMMITTEE

Mailing Address **601 PENNSYLVANIA AVENUE NORTH
BUILDING SUITE 600**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00317446**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
MM / DD / YYYY
12 / 02 / 2011

Transaction ID : SA11C.4133

Amount of Each Receipt this Period
2500.00

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

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
MM / DD / YYYY

Amount of Each Receipt this Period

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

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

2500.00

2500.00

12020050424

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 12			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Oregon-Virginia Fund

Full Name (Last, First, Middle Initial) A. Capitol Compliance Associates		Date of Disbursement MM / DD / YYYY 12 / 20 / 2011
Mailing Address 426 C St NE		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.4142
City Washington State DC Zip Code 20002	Purpose of Disbursement Compliance Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	1500.00

12020050425

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 12	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c
		<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Oregon-Virginia Fund

Full Name (Last, First, Middle Initial)
A. FRIENDS OF MARK WARNER

Mailing Address **201 NORTH UNION STREET SUITE 300**

City **ALEXANDRIA** State **VA** Zip Code **22314**

Purpose of Disbursement
Transfer

Candidate Name
MARK ROBERT WARNER

Office Sought: House Senate President
Disbursement For: 2014 Primary General
 Other (specify)

State: **VA** District: **00**

Date of Disbursement
12 / 30 / 2011

Amount of Each Disbursement this Period
11132.22

Transaction ID : **SB18.4144**

Full Name (Last, First, Middle Initial)
B. JEFF MERKLEY FOR OREGON

Mailing Address **2236 SE 10TH AVE**

City **PORTLAND** State **OR** Zip Code **97214**

Purpose of Disbursement
Transfer

Candidate Name
JEFFREY ALAN MERKLEY

Office Sought: House Senate President
Disbursement For: 2014 Primary General
 Other (specify)

State: **OR** District: **00**

Date of Disbursement
12 / 30 / 2011

Amount of Each Disbursement this Period
10204.53

Transaction ID : **SB18.4143**

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... **21336.75**

TOTAL This Period (last page this line number only)..... **21336.75**

12020050426

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 01-30-12
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

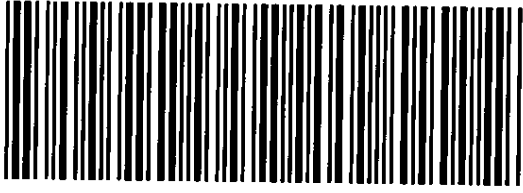
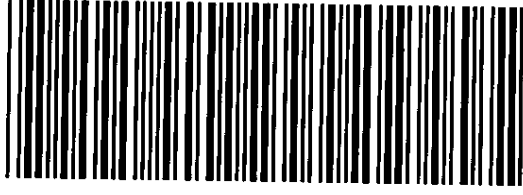
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

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