

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
Oregon Republican Party

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 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)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 Rob Kremer

Signature of Treasurer Rob Kremer [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Oregon Republican Party

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>	<input type="text" value="4482.23"/>	<input type="text" value="4482.23"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="5998.44"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="74914.47"/>	<input type="text" value="374172.48"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="80912.91"/>	<input type="text" value="378654.71"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="50311.23"/>	<input type="text" value="348053.03"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="30601.68"/>	<input type="text" value="30601.68"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="35141.19"/>	

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: 11 / 01 / 2011 To: 11 / 30 / 2011

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		
(i) Itemized (use Schedule A).....	43092.37	180044.78
(ii) Unitemized .....	5585	99224.6
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	48677.37	279269.38
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	125	10125
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	48802.37	289394.38
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received .....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	1112.1	2225.1
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	25000	82553
(b) Levin Funds (from Schedule H5) .....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	25000	82553
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	74914.47	374172.48
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	49914.47	291619.48

**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) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	5065.42	58085.72
(ii) Non-Federal Share.....	9650.29	143068.04
(b) Other Federal Operating Expenditures .....	500	3862.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	15215.71	205016.23
22. Transfers to Affiliated/Other Party Committees.....	30367.5	58246.27
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	0
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	1500	5000
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	125	135
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	125	135
29. Other Disbursements .....	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	3103.02	79655.53
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	3103.02	79655.53
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	50311.23	348053.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	40660.94	204984.99

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	48802.37	289394.38
34. Total Contribution Refunds (from Line 28(d)) .....	125	135
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	48677.37	289259.38
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	5565.42	61948.19
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1112.1	2225.1
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4453.32	59723.09

**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 6 OF 55
	<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**

Full Name (Last, First, Middle Initial)  
**A. Duncan Murray**

Mailing Address 3190 Queens East Street

City Eugene State OR Zip Code 97401-8525

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 ▼ **585**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 03 / 2011**

**Transaction ID : SA11AI-1184-129364-c**

Amount of Each Receipt this Period  
**125**

Full Name (Last, First, Middle Initial)  
**B. Eva Swain**

Mailing Address PO Box 330

City Hood River State OR Zip Code 97031-0067

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

Name of Employer Swain Motors Occupation Automobile Dealers

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 04 / 2011**

**Transaction ID : SA11AI14892129414c**

Amount of Each Receipt this Period  
**250**

Full Name (Last, First, Middle Initial)  
**C. James Parker**

Mailing Address 14422 SE Nehalem Street

City Portland State OR Zip Code 97236-5379

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

Name of Employer UBS Financial Services Occupation financial advisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1315**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 11 / 2011**

**Transaction ID : SA11AI17660129353c**

Amount of Each Receipt this Period  
**1000**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1375.00</b>
<b>TOTAL</b> 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 7 OF 55  
(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**

Full Name (Last, First, Middle Initial)  
**A. Joan Austin**

Mailing Address PO Box 209

City State Zip Code  
 Newberg OR 97132-0209

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

Name of Employer Occupation  
 A-dec, Inc. CEO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 10125

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2011

**Transaction ID : SA11AI17714129361c**

Amount of Each Receipt this Period  
 2500

Full Name (Last, First, Middle Initial)  
**B. Joan Austin**

Mailing Address PO Box 209

City State Zip Code  
 Newberg OR 97132-0209

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

Name of Employer Occupation  
 A-dec, Inc. CEO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 10125

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 04 / 2011

**Transaction ID : SA11AI17714129395c**

Amount of Each Receipt this Period  
 125

Full Name (Last, First, Middle Initial)  
**C. Janice Williamson**

Mailing Address 4065 Mandy Avenue SE

City State Zip Code  
 Salem OR 97302-1712

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 ▼  
 485

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 11 / 2011

**Transaction ID : SA11AI-1861-129344-c**

Amount of Each Receipt this Period  
 50

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2675.00

**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 8 OF 55  
(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. Janice Williamson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4065 Mandy Avenue SE  
 City Salem State OR Zip Code 97302-1712  
 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 ▼ **485**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2011  
**Transaction ID : SA11AI-1861-129381-c**  
 Amount of Each Receipt this Period  
**125**  
 Aggregate Year-to-Date ▼ **485**

**B. Peter Jones**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7437 SE Reed College Place  
 City Portland State OR Zip Code 97202-8360  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer self Occupation Stockbroker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **375**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2011  
**Transaction ID : SA11AI-2000-129402-c**  
 Amount of Each Receipt this Period  
**250**  
 Aggregate Year-to-Date ▼ **375**

**C. Ryan Bounds**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4147 SW Westdale Drive  
 City Portland State OR Zip Code 97221-3152  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer US Dept of Justice Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **225**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 11 / 2011  
**Transaction ID : SA11AI25187129355c**  
 Amount of Each Receipt this Period  
**100**  
 Aggregate Year-to-Date ▼ **225**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **475.00**  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 55
<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**

Full Name (Last, First, Middle Initial) <b>A. Ryan Bounds</b>		Date of Receipt 11 / 04 / 2011 <b>Transaction ID : SA11AI25187129413c</b>
Mailing Address 4147 SW Westdale Drive		Amount of Each Receipt this Period 125
City Portland	State OR	Zip Code 97221-3152
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125
Name of Employer US Dept of Justice	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225	

Full Name (Last, First, Middle Initial) <b>B. William Pierce</b>		Date of Receipt 11 / 11 / 2011 <b>Transaction ID : SA11AI25256129349c</b>
Mailing Address 961 Glen Eden Court NW		Amount of Each Receipt this Period 1000
City Salem	State OR	Zip Code 97304-2258
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Self Employed	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 16000	

Full Name (Last, First, Middle Initial) <b>C. William Pierce</b>		Date of Receipt 11 / 01 / 2011 <b>Transaction ID : SA11AI25256129387c</b>
Mailing Address 961 Glen Eden Court NW		Amount of Each Receipt this Period 5000
City Salem	State OR	Zip Code 97304-2258
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000
Name of Employer Self Employed	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 16000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6125.00
<b>TOTAL</b> 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 OF 55  
(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**

Full Name (Last, First, Middle Initial)  
**A. Gary R. Coe**

Mailing Address 6255 SW Sheridan Street

City State Zip Code  
 Portland OR 97225-8106

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

Name of Employer Occupation  
 Speed's Supertow Owner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 525.01

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 11 / 2011  
**Transaction ID : SA11AI26023129348c**

Amount of Each Receipt this Period  
 500

Full Name (Last, First, Middle Initial)  
**B. Kenneth Gustafson**

Mailing Address 1825 SE Saint Andrews Drive

City State Zip Code  
 Portland OR 97202-9023

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

Name of Employer Occupation  
 Self CPA

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1125

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 11 / 2011  
**Transaction ID : SA11AI28460129331c**

Amount of Each Receipt this Period  
 900

Full Name (Last, First, Middle Initial)  
**C. Kenneth Gustafson**

Mailing Address 1825 SE Saint Andrews Drive

City State Zip Code  
 Portland OR 97202-9023

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

Name of Employer Occupation  
 Self CPA

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1125

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 11 / 2011  
**Transaction ID : SA11AI28460129332c**

Amount of Each Receipt this Period  
 100

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00

**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 OF 55  
(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**

Full Name (Last, First, Middle Initial)  
**A. Kenneth Gustafson**  
Mailing Address 1825 SE Saint Andrews Drive  
City Portland State OR Zip Code 97202-9023  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation CPA  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1125

Date of Receipt  
11 / 01 / 2011  
**Transaction ID : SA11AI28460129384c**  
Amount of Each Receipt this Period  
125

Full Name (Last, First, Middle Initial)  
**B. Charles Watkins**  
Mailing Address 43 Aquinas Street  
City Lake Oswego State OR Zip Code 97035-1203  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Care Innovations Occupation Programmer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 550

Date of Receipt  
11 / 04 / 2011  
**Transaction ID : SA11AI28895129410c**  
Amount of Each Receipt this Period  
50

Full Name (Last, First, Middle Initial)  
**C. Loren Later**  
Mailing Address 35628 High Ranch Drive  
City Springfield State OR Zip Code 97478-8226  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Knife River Crop Occupation Business Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 345

Date of Receipt  
11 / 04 / 2011  
**Transaction ID : SA11AI29523129392c**  
Amount of Each Receipt this Period  
125

**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: (check only one)	PAGE 12 OF 55
<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**

Full Name (Last, First, Middle Initial)  
**A. Allen Alley**

Mailing Address 1003 Terrace Drive

City Lake Oswego State OR Zip Code 97034-4698

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

Name of Employer Self Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1642.1

Date of Receipt  
11 / 29 / 2011  
**Transaction ID : SA11AI29598129441c**

Amount of Each Receipt this Period  
1112.1

Full Name (Last, First, Middle Initial)  
**B. Michael Kehoe**

Mailing Address PO Box 428

City Lake Oswego State OR Zip Code 97034-0428

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

Name of Employer Self Occupation Investor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375

Date of Receipt  
11 / 11 / 2011  
**Transaction ID : SA11AI30210129345c**

Amount of Each Receipt this Period  
250

Full Name (Last, First, Middle Initial)  
**C. David Brown**

Mailing Address 13925 Fosberg Road

City Lake Oswego State OR Zip Code 97035-1803

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

Name of Employer Obsidian Finance Group Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
625

Date of Receipt  
11 / 11 / 2011  
**Transaction ID : SA11AI30220129346c**

Amount of Each Receipt this Period  
500

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1862.10
<b>TOTAL</b> 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 OF 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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. David Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13925 Fosberg Road  
 City Lake Oswego State OR Zip Code 97035-1803  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Obsidian Finance Group Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **625**

Date of Receipt **11 / 04 / 2011**  
**Transaction ID : SA11AI30220129411c**  
 Amount of Each Receipt this Period **125**

**B. Mary Rigert**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7972 SW Red Sunset Lane  
 City Beaverton State OR Zip Code 97007-7778  
 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 ▼ **215**

Date of Receipt **11 / 14 / 2011**  
**Transaction ID : SA11AI30724129107c**  
 Amount of Each Receipt this Period **50**

**C. Timothy McMenam**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 22202  
 City Portland State OR Zip Code 97269-2202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Payless Pharmacy Occupation Pharmacist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **675**

Date of Receipt **11 / 01 / 2011**  
**Transaction ID : SA11AI32642129375c**  
 Amount of Each Receipt this Period **125**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>300.00</b>
<b>TOTAL</b> 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 14 OF 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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**

Full Name (Last, First, Middle Initial) <b>A. Timothy McMenam</b>		Date of Receipt 11 / 01 / 2011 <b>Transaction ID : SA11AI32642129379c</b>
Mailing Address PO Box 22202		Amount of Each Receipt this Period 25
City Portland	State OR	Zip Code 97269-2202
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 675
Name of Employer Payless Pharmacy	Occupation Pharmacist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>B. Carroll Dressler</b>		Date of Receipt 11 / 14 / 2011 <b>Transaction ID : SA11AI33167129098c</b>
Mailing Address 867 NW Haleakala Way		Amount of Each Receipt this Period 50
City Bend	State OR	Zip Code 97701-6726
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 305
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 ▼	

Full Name (Last, First, Middle Initial) <b>C. Sarah Dressler</b>		Date of Receipt 11 / 01 / 2011 <b>Transaction ID : SA11AI33168129366c</b>
Mailing Address 867 NW Haleakala Way		Amount of Each Receipt this Period 50
City Bend	State OR	Zip Code 97701-6726
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 230
Name of Employer N/A	Occupation Student	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<b>TOTAL</b> 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 OF 55  
(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**

Full Name (Last, First, Middle Initial)  
**A. Dennis Fioravanti**

Mailing Address 14090 SE Alta Vista Drive

City State Zip Code  
Portland OR 97086-8006

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

Name of Employer Occupation  
Essential Wholesale CEO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**15775**

Date of Receipt  
 /  /   
**11 / 11 / 2011**

**Transaction ID : SA11AI33254129334c**

Amount of Each Receipt this Period  
**4150**

Full Name (Last, First, Middle Initial)  
**B. Dennis Fioravanti**

Mailing Address 14090 SE Alta Vista Drive

City State Zip Code  
Portland OR 97086-8006

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

Name of Employer Occupation  
Essential Wholesale CEO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**15775**

Date of Receipt  
 /  /   
**11 / 11 / 2011**

**Transaction ID : SA11AI33254129335c**

Amount of Each Receipt this Period  
**2500**

Full Name (Last, First, Middle Initial)  
**C. Dennis Fioravanti**

Mailing Address 14090 SE Alta Vista Drive

City State Zip Code  
Portland OR 97086-8006

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

Name of Employer Occupation  
Essential Wholesale CEO

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**15775**

Date of Receipt  
 /  /   
**11 / 01 / 2011**

**Transaction ID : SA11AI33254129386c**

Amount of Each Receipt this Period  
**1625**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **8275.00**

**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 OF 55  
(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. Dwight Coon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box571  
 City Junction City State OR Zip Code 97448  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 City of Eugene Park Specialist 2  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ **440**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 04 / 2011**  
**Transaction ID : SA11AI33311129394c**  
 Amount of Each Receipt this Period  
**250**

**B. John Husa**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17336 Canyon Court  
 City Lake Oswego State OR Zip Code 97034-6704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Airefco, Inc President  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ **2750**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 11 / 2011**  
**Transaction ID : SA11AI33336129336c**  
 Amount of Each Receipt this Period  
**2150**

**C. John Husa**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17336 Canyon Court  
 City Lake Oswego State OR Zip Code 97034-6704  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Airefco, Inc President  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ **2750**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 11 / 2011**  
**Transaction ID : SA11AI33336129337c**  
 Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **2900.00**  
**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 OF 55  
(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**

Full Name (Last, First, Middle Initial)  
**A. Jaymie Jennings**

Mailing Address 4015 Canal Woods Court

City Lake Oswego      State OR      Zip Code 97034-7221

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

Name of Employer ORP      Occupation Asst. to Chairman

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 14 / 2011**

**Transaction ID : SA11AI33338129108c**

Amount of Each Receipt this Period  
**100**

Full Name (Last, First, Middle Initial)  
**B. Donna Cain**

Mailing Address 6580 E Evans Creek Road

City Rogue River      State OR      Zip Code 97537-9605

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

Name of Employer Asante' Health Systems      Occupation Patient Care Tech

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **645**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 01 / 2011**

**Transaction ID : SA11AI-3664-129385-c**

Amount of Each Receipt this Period  
**125**

Full Name (Last, First, Middle Initial)  
**C. Hillary Bounds**

Mailing Address 1310 NW Naito Parkway  
Unit 1005

City Portland      State OR      Zip Code 97209-3162

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

Name of Employer Oregon University System      Occupation Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1090**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 11 / 2011**

**Transaction ID : SA11AI66704129354c**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **1225.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 55
	<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. Manuel Castaneda**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8554 SW 166th Terrace  
 City State Zip Code  
 Beaverton OR 97007-6478  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Pro Landscape Inc Business Owner  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2011  
**Transaction ID : SA11AI66789129360c**  
 Amount of Each Receipt this Period  
 250

**B. Carl Christoferson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2911 NE Tjhopmson St  
 City State Zip Code  
 Portland or 97212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Oregon Investments, LLC Private Equity  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5625

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 11 / 2011  
**Transaction ID : SA11AI66796129347c**  
 Amount of Each Receipt this Period  
 500

**C. Douglas Dryden**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24128 Alsea Highway  
 City State Zip Code  
 Philomath OR 97370-9113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 OYA Counselor  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 275

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 04 / 2011  
**Transaction ID : SA11AI66803129415c**  
 Amount of Each Receipt this Period  
 25

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	775.00
<b>TOTAL</b> 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 19 OF 55
	<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. S Lynn Dryden**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 24128 Alsea Highway  
 City Philomath State OR Zip Code 97370-9113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Kampfer Enterprises, Inc. Occupation Real Estate Broker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **275**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2011  
**Transaction ID : SA11AI66804129416c**  
 Amount of Each Receipt this Period  
**25**

**B. Paul Savas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 68240  
 City Oak Grove State OR Zip Code 97268-0240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Government Occupation County Commissioner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **375**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2011  
**Transaction ID : SA11AI66822129105c**  
 Amount of Each Receipt this Period  
**250**

**C. Paul Savas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 68240  
 City Oak Grove State OR Zip Code 97268-0240  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Government Occupation County Commissioner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **375**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2011  
**Transaction ID : SA11AI66822129382c**  
 Amount of Each Receipt this Period  
**125**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>400.00</b>
<b>TOTAL</b> 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 20 OF 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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. Michelle Dorman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1345 Chandler Road  
City Lake Oswego State OR Zip Code 97034-2807  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Community Organizer  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **525**

Date of Receipt **11 / 11 / 2011**  
**Transaction ID : SA11AI66842129338c**  
Amount of Each Receipt this Period **400**

**B. Nicole Kennedy**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1586  
City Lake Oswego State OR Zip Code 97035-0786  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **2900**

Date of Receipt **11 / 11 / 2011**  
**Transaction ID : SA11AI66881129325c**  
Amount of Each Receipt this Period **1900**

**C. Nicole Kennedy**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1586  
City Lake Oswego State OR Zip Code 97035-0786  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **2900**

Date of Receipt **11 / 11 / 2011**  
**Transaction ID : SA11AI66881129351c**  
Amount of Each Receipt this Period **1000**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3300.00</b>
<b>TOTAL</b> 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 21 OF 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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**

Full Name (Last, First, Middle Initial) <b>A. Roger Bounds</b>		Date of Receipt 11 / 11 / 2011 <b>Transaction ID : SA11AI66882129326c</b>
Mailing Address PO Box 148		Amount of Each Receipt this Period 250
City Hermiston	State OR	Zip Code 97838-0148
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
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 ▼ 575	

Full Name (Last, First, Middle Initial) <b>B. Roger Bounds</b>		Date of Receipt 11 / 11 / 2011 <b>Transaction ID : SA11AI66882129327c</b>
Mailing Address PO Box 148		Amount of Each Receipt this Period 325
City Hermiston	State OR	Zip Code 97838-0148
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 325
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 ▼ 575	

Full Name (Last, First, Middle Initial) <b>C. Patricia Buehler</b>		Date of Receipt 11 / 11 / 2011 <b>Transaction ID : SA11AI66883129328c</b>
Mailing Address 1122 NW Foxwood		Amount of Each Receipt this Period 1300
City Bend	State OR	Zip Code 97701-8606
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1300
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1875.00
<b>TOTAL</b> 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 22 OF 55  
(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**

Full Name (Last, First, Middle Initial)  
**A. May Trucking**

Mailing Address PO Box 9039

City Salem State OR Zip Code 97305-0039

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 11 / 2011  
**Transaction ID : SA11AI66884129329c**

Amount of Each Receipt this Period  
1250

Full Name (Last, First, Middle Initial)  
**B. Rob Miller**

Mailing Address 1130 SW King Avenue

City Portland State OR Zip Code 97205-1116

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

Name of Employer Occupation  
Trailblazer foods President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 11 / 2011  
**Transaction ID : SA11AI66885129330c**

Amount of Each Receipt this Period  
1250

Full Name (Last, First, Middle Initial)  
**C. Rob Miller**

Mailing Address 1130 SW King Avenue

City Portland State OR Zip Code 97205-1116

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

Name of Employer Occupation  
Trailblazer foods President

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2011  
**Transaction ID : SA11AI66885129401c**

Amount of Each Receipt this Period  
1250

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3750.00

**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 23 OF 55  
(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**

Full Name (Last, First, Middle Initial)  
**A. Peter Watts**

Mailing Address 13348 Fielding Road

City Lake Oswego      State OR      Zip Code 97034-2419

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

Name of Employer: Jordan Ramis      Occupation: Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 11 / 2011  
**Transaction ID : SA11AI66886129333c**

Amount of Each Receipt this Period  
500

Full Name (Last, First, Middle Initial)  
**B. William Campbell**

Mailing Address 1331 NW Lovejoy Street Suite 850

City Portland      State OR      Zip Code 97209-2994

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

Name of Employer: Equilibrium Capital Group      Occupation: Investor

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.27

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 11 / 2011  
**Transaction ID : SA11AI66887129340c**

Amount of Each Receipt this Period  
125

Full Name (Last, First, Middle Initial)  
**C. William Campbell**

Mailing Address 1331 NW Lovejoy Street Suite 850

City Portland      State OR      Zip Code 97209-2994

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

Name of Employer: Equilibrium Capital Group      Occupation: Investor

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.27

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2011  
**Transaction ID : SA11AI66887129433c**

Amount of Each Receipt this Period  
105.27

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 730.27

**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 24 OF 55
	<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. Peter Richter**  
Full Name (Last, First, Middle Initial)

Mailing Address 2245 SW Park Place  
Unit 10A

City Portland State OR Zip Code 97205-1130

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

Name of Employer Miller Nash Occupation Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2100

Date of Receipt  
11 / 11 / 2011  
**Transaction ID : SA11AI66888129341c**

Amount of Each Receipt this Period  
2100

**B. Rene Fritz**  
Full Name (Last, First, Middle Initial)

Mailing Address 5550 SW Macadam Avenue  
Suite 110

City Portland State OR Zip Code 97239-3772

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

Name of Employer CEF, Inc. Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900

Date of Receipt  
11 / 11 / 2011  
**Transaction ID : SA11AI66889129342c**

Amount of Each Receipt this Period  
900

**C. Natasha Tiffany**  
Full Name (Last, First, Middle Initial)

Mailing Address 4968 Circuit Rider Lane S

City Salem State OR Zip Code 97302-9310

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

Name of Employer Self Occupation doctor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000

Date of Receipt  
11 / 11 / 2011  
**Transaction ID : SA11AI66891129352c**

Amount of Each Receipt this Period  
1000

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4000.00
<b>TOTAL</b> 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 25 OF 55  
(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**

Full Name (Last, First, Middle Initial)  
**A. Mike Neff**

Mailing Address 7700 SW Westmoor Way

City State Zip Code  
Portland OR 97225-2141

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

Name of Employer Occupation  
Haglund Kelley Partner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 11 / 2011  
**Transaction ID : SA11AI66892129356c**

Amount of Each Receipt this Period  
250

Full Name (Last, First, Middle Initial)  
**B. Brendan McDonnell**

Mailing Address 179 Iron Mountain Boulevard

City State Zip Code  
Lake Oswego OR 97034-2823

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

Name of Employer Occupation  
K & L Gates Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2011  
**Transaction ID : SA11AI66895129371c**

Amount of Each Receipt this Period  
250

Full Name (Last, First, Middle Initial)  
**C. Rita Donnelly**

Mailing Address 1104 Forest Meadows Way

City State Zip Code  
Lake Oswego OR 97034-1534

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2011  
**Transaction ID : SA11AI66901129397c**

Amount of Each Receipt this Period  
250

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00

**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 26 OF 55  
(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. Boni Halton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 18408 Old River Landing  
City Lake Oswego State OR Zip Code 97034-5183  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Halton Companies Occupation Construction  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 14 / 2011  
**Transaction ID : SA11AI-6879-129102-c**  
Amount of Each Receipt this Period  
250

**B. Sandra Abercrombie**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 4341  
City Medford State OR Zip Code 97501-0166  
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 ▼ 355

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2011  
**Transaction ID : SA11AI-915-129389-c**  
Amount of Each Receipt this Period  
125

**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) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	375.00
<b>TOTAL</b> This Period (last page this line number only).....▶	43092.37

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

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

FOR LINE NUMBER: PAGE 27 OF 55  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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. Friends of Bruce Hanna**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1304  
City Silvertown State OR Zip Code 97381-0079  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ **125**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 11 / 2011**  
**Transaction ID : SA11C-63953-129324-c**  
Amount of Each Receipt this Period  
**125**

**B.**  
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) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

**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) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>125.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>125.00</b>

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

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

FOR LINE NUMBER: PAGE 28 OF 55  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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**

Full Name (Last, First, Middle Initial)  
**A. Regence Blue Cross Blue Shield of Oregon**

Mailing Address PO Box 1271

City Portland State OR Zip Code 97207-1271

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2225.1

Date of Receipt  
11 / 04 / 2011  
Transaction ID : SA15-65471-129297-e

Amount of Each Receipt this Period  
1112.1

Refund Health Insurance Premium

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1112.10
<b>TOTAL</b> This Period (last page this line number only).....▶	1112.10

# 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**

Full Name (Last, First, Middle Initial)

### A. FLS Connect

Mailing Address 7320 N Dreamy Draw Drive

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement  
Fundraising Phone Calls - OR GOP

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : SB21B-38028-129281-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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)

<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**

Full Name (Last, First, Middle Initial)

**A. Oregon Republican Party State Account**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2011

Mailing Address c/o Key Bank  
1500 Edgewater St NW

**Transaction ID : SB22-34228-129306-e**

City Salem State OR Zip Code 97302

Amount of Each Disbursement this Period

4868.75
---------

Purpose of Disbursement  
NOTE: For cash flow purposes only

011
Category/ Type

Candidate Name

**Oregon Republican Party State Account**

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

Full Name (Last, First, Middle Initial)

**B. Oregon Republican Party State Account**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2011

Mailing Address c/o Key Bank  
1500 Edgewater St NW

**Transaction ID : SB22-34228-129307-e**

City Salem State OR Zip Code 97302

Amount of Each Disbursement this Period

3443.75
---------

Purpose of Disbursement  
NOTE: For cash flow purposes only

011
Category/ Type

Candidate Name

**Oregon Republican Party State Account**

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

Full Name (Last, First, Middle Initial)

**C. Oregon Republican Party State Account**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2011

Mailing Address c/o Key Bank  
1500 Edgewater St NW

**Transaction ID : SB22-34228-129308-e**

City Salem State OR Zip Code 97302

Amount of Each Disbursement this Period

8050
------

Purpose of Disbursement  
NOTE: For cash flow purposes only

011
Category/ Type

Candidate Name

**Oregon Republican Party State Account**

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

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

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

16362.50
----------

--

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input 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**

Full Name (Last, First, Middle Initial)

**A. Oregon Republican Party State Account**

Mailing Address c/o Key Bank  
1500 Edgewater St NW

City Salem State OR Zip Code 97302

Purpose of Disbursement  
NOTE: For cash flow purposes only

011

Candidate Name  
**Oregon Republican Party State Account**

Category/  
Type

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

Date of Disbursement

MM / DD / YYYY  
11 / 14 / 2011

Transaction ID : **SB22-34228-129309-e**

Amount of Each Disbursement this Period

118.75

Full Name (Last, First, Middle Initial)

**B. Oregon Republican Party State Account**

Mailing Address c/o Key Bank  
1500 Edgewater St NW

City Salem State OR Zip Code 97302

Purpose of Disbursement  
NOTE: For cash flow purposes only

011

Candidate Name  
**Oregon Republican Party State Account**

Category/  
Type

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

Date of Disbursement

MM / DD / YYYY  
11 / 14 / 2011

Transaction ID : **SB22-34228-129310-e**

Amount of Each Disbursement this Period

261.25

Full Name (Last, First, Middle Initial)

**C. Oregon Republican Party State Account**

Mailing Address c/o Key Bank  
1500 Edgewater St NW

City Salem State OR Zip Code 97302

Purpose of Disbursement  
memo: Joan Austin-Transfer contribution

011

Candidate Name  
**Oregon Republican Party State Account**

Category/  
Type

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

Date of Disbursement

MM / DD / YYYY  
11 / 14 / 2011

Transaction ID : **SB22-34228-129442-e**

Amount of Each Disbursement this Period

125

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

505.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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**

Full Name (Last, First, Middle Initial)

**A. Oregon Republican Party State Account**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		14		2011

Mailing Address c/o Key Bank  
1500 Edgewater St NW

**Transaction ID : SB22-34228-129443-e**

City Salem State OR Zip Code 97302

Amount of Each Disbursement this Period

6000
------

Purpose of Disbursement  
memo: William Pierce transfer contribution

011
Category/ Type

Candidate Name

**Oregon Republican Party State Account**

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

Full Name (Last, First, Middle Initial)

**B. Oregon Republican Party State Account**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		14		2011

Mailing Address c/o Key Bank  
1500 Edgewater St NW

**Transaction ID : SB22-34228-129444-e**

City Salem State OR Zip Code 97302

Amount of Each Disbursement this Period

5775
------

Purpose of Disbursement  
memo: Dennis Fioravanti transfer contribution

011
Category/ Type

Candidate Name

**Oregon Republican Party State Account**

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

Full Name (Last, First, Middle Initial)

**C. Oregon Republican Party State Account**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		14		2011

Mailing Address c/o Key Bank  
1500 Edgewater St NW

**Transaction ID : SB22-34228-129445-e**

City Salem State OR Zip Code 97302

Amount of Each Disbursement this Period

1250
------

Purpose of Disbursement  
Memo: May Trucking transfer business contribution

011
Category/ Type

Candidate Name

**Oregon Republican Party State Account**

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

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

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

13025.00
----------

--



**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" 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**

Full Name (Last, First, Middle Initial)

**A. F. Douglas Day**

Mailing Address 2929 NW Cumberland Road

City Portland State OR Zip Code 97210-2706

Purpose of Disbursement  
Loan Repayment

Candidate Name

**F. Douglas Day**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)  Retire Debt -

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		16		2011

Transaction ID : **SB26-28572-57-R**

Amount of Each Disbursement this Period

500
-----

Full Name (Last, First, Middle Initial)

**B. Julie Scheel**

Mailing Address 3951 Croisan Creek Road S

City Salem State OR Zip Code 97302-9474

Purpose of Disbursement  
Loan Repayment

Candidate Name

**Julie Scheel**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)  Retire Debt -

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		16		2011

Transaction ID : **SB26-1975-56-R**

Amount of Each Disbursement this Period

500
-----

Full Name (Last, First, Middle Initial)

**C. Michael Scheel**

Mailing Address 3951 Croisan Creek Road S

City Salem State OR Zip Code 97302-9474

Purpose of Disbursement  
Loan Repayment

Candidate Name

**Michael Scheel**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)  Retire Debt -

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		16		2011

Transaction ID : **SB26-585-58-R**

Amount of Each Disbursement this Period

500
-----

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

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

1500.00
---------

1500.00
---------

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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 checked="" 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**

Full Name (Last, First, Middle Initial)

### A. Mark Beilstein

Mailing Address 17334 Bergis Farm Drive

City Lake Oswego State OR Zip Code 97034-6118

Purpose of Disbursement  
Refund over payment for dinner

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : SB28a-66858-129365-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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)

<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**

Full Name (Last, First, Middle Initial)

**A. Oregon Department of Revenue**

Mailing Address PO Box 14800

City Salem State OR Zip Code 97309-0920

Purpose of Disbursement  
FEA 100% Federal: Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 04 / 2011

Transaction ID : SB30b-45064-129290-e

Amount of Each Disbursement this Period

40

Full Name (Last, First, Middle Initial)

**B. Oregon Department of Revenue**

Mailing Address PO Box 14800

City Salem State OR Zip Code 97309-0920

Purpose of Disbursement  
FEA 100% Federal: Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 18 / 2011

Transaction ID : SB30b-45064-129291-e

Amount of Each Disbursement this Period

40

Full Name (Last, First, Middle Initial)

**C. Oregon Department of Revenue**

Mailing Address PO Box 14800

City Salem State OR Zip Code 97309-0920

Purpose of Disbursement  
FEA 100% Federal: Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
11 / 29 / 2011

Transaction ID : SB30b-45064-129292-e

Amount of Each Disbursement this Period

3.97

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

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

83.97

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**Oregon Republican Party**

Full Name (Last, First, Middle Initial)

**A. QuickBooks**

Mailing Address 520 Townsend Street

City San Francisco State CA Zip Code 94103-6241

Purpose of Disbursement  
Payroll Auto Deposit Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 15 / 2011

Transaction ID : SB30b-57422-129293-e

Amount of Each Disbursement this Period

1.25

Full Name (Last, First, Middle Initial)

**B. QuickBooks**

Mailing Address 520 Townsend Street

City San Francisco State CA Zip Code 94103-6241

Purpose of Disbursement  
Payroll Auto Deposit Fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 29 / 2011

Transaction ID : SB30b-57422-129294-e

Amount of Each Disbursement this Period

1.25

Full Name (Last, First, Middle Initial)

**C. Regence Blue Cross Blue Shield of Oregon**

Mailing Address PO Box 1271

City Portland State OR Zip Code 97207-1271

Purpose of Disbursement  
Health Insurance Premium

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 28 / 2011

Transaction ID : SB30b-65471-129295-e

Amount of Each Disbursement this Period

370.7

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

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

373.20

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**Oregon Republican Party**

Full Name (Last, First, Middle Initial)

**A. Regence Blue Cross Blue Shield of Oregon**

Mailing Address PO Box 1271

City Portland State OR Zip Code 97207-1271

Purpose of Disbursement  
Health Insurance Premium

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 28 / 2011

Transaction ID : SB30b-65471-129296-e

Amount of Each Disbursement this Period

1112.1

Full Name (Last, First, Middle Initial)

**B. United States Treasury**

Mailing Address Internal Revenue Serv

City Ogden State UT Zip Code 84201-0065

Purpose of Disbursement  
FEA 100% Federal: Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 02 / 2011

Transaction ID : SB30b-34571-129302-e

Amount of Each Disbursement this Period

141.76

Full Name (Last, First, Middle Initial)

**C. United States Treasury**

Mailing Address Internal Revenue Serv

City Ogden State UT Zip Code 84201-0065

Purpose of Disbursement  
FEA 100% Federal: Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 16 / 2011

Transaction ID : SB30b-34571-129303-e

Amount of Each Disbursement this Period

141.74

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

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

1395.60

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**Oregon Republican Party**

Full Name (Last, First, Middle Initial)

**A. Jaymie Jennings**

Mailing Address 4015 Canal Woods Court

City Lake Oswego State OR Zip Code 97034-7221

Purpose of Disbursement  
FEA 100% Federal: Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 15 / 2011

**Transaction ID : SB30b-33338-129285-e**

Amount of Each Disbursement this Period

625.13

Full Name (Last, First, Middle Initial)

**B. Jaymie Jennings**

Mailing Address 4015 Canal Woods Court

City Lake Oswego State OR Zip Code 97034-7221

Purpose of Disbursement  
FEA 100% Federal: Payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 30 / 2011

**Transaction ID : SB30b-33338-129286-e**

Amount of Each Disbursement this Period

625.12

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

1250.25

3103.02

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **Oregon Republican Party** Transaction ID : **SC/10-L87407**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) F. Douglas Day	Election: 1990 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
Mailing Address 2929 NW Cumberland Road	
City Portland State OR ZIP Code 97210-2706	

Original Amount of Loan 10000	Cumulative Payment To Date 3568.04	Balance Outstanding at Close of This Period 6431.96
----------------------------------	---------------------------------------	--------------------------------------------------------

**TERMS**

Date Incurred: MM / DD / YYYY: 02 / 04 / 2008  
 Date Due: MM / DD / YYYY: 12 / 31 / 2012  
 Interest Rate: 0.00 % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	[ ] 6431.96
<b>TOTALS</b> This Period (last page in this line only)..... ▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Oregon Republican Party** Transaction ID : **SC/10-L88097**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Julie Scheel	Election: 1990 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
Mailing Address 3951 Croisan Creek Road S	
City Salem State OR ZIP Code 97302-9474	

Original Amount of Loan 10000	Cumulative Payment To Date 1986.29	Balance Outstanding at Close of This Period 8013.71
----------------------------------	---------------------------------------	--------------------------------------------------------

**TERMS**

Date Incurred MM / DD / YYYY 01 / 31 / 2008	Date Due MM / DD / YYYY 12 / 31 / 2012	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------------------------	----------------------------------------------	-------------------------------	---------------------------------------------------------------------------------

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	[ ] 8013.71
<b>TOTALS</b> This Period (last page in this line only)..... ▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **Oregon Republican Party** Transaction ID : SC/10-L88081

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Michael Scheel	Election: 1990 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
Mailing Address 3951 Croisan Creek Road S	
City Salem State OR ZIP Code 97302-9474	

Original Amount of Loan 10000	Cumulative Payment To Date 2986.29	Balance Outstanding at Close of This Period 7013.71
----------------------------------	---------------------------------------	--------------------------------------------------------

**TERMS**

Date Incurred: MM/DD/YYYY 01/31/2008 Date Due: MM/DD/YYYY 12/31/2012 Interest Rate: 0.00 % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional)..... ▶	7013.71
<b>TOTALS</b> This Period (last page in this line only)..... ▶	21459.38

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 43 OF 55
	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 <b>Direct Mail Systems, Inc</b>	Nature of Debt (Purpose): 1020:ADMINISTRATION B 11 1: Party Printing
Mailing Address 12450 Automobile Boulevard	
City State Zip Code Clearwater FL 33762-4427	

Outstanding Balance Beginning This Period 8473.27	<b>Transaction ID : SD10-DEBT130454</b>	
Amount Incurred This Period 0	Payment This Period 500	Outstanding Balance at Close of This Period 7973.27

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Integra Telecom</b>	Nature of Debt (Purpose): 1020:ADMINISTRATION B 11 1: Phone Service
Mailing Address PO Box 34988	
City State Zip Code Seattle WA 98124-1988	

Outstanding Balance Beginning This Period 238.49	<b>Transaction ID : SD10-DEBT127936</b>	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 238.49

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FLS Connect</b>	Nature of Debt (Purpose): Administrative/Salary/Overhead: Fundraising Phone Calls - OR GOP
Mailing Address 7320 N Dreamy Draw Drive	
City State Zip Code Phoenix AZ 85020-5212	

Outstanding Balance Beginning This Period 5970.05	<b>Transaction ID : SD10-DEBT130402</b>	
Amount Incurred This Period 0	Payment This Period 500	Outstanding Balance at Close of This Period 5470.05

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	13681.81
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	13681.81
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	21459.38
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	35141.19

**SCHEDULE H2 (FEC Form 3X)**

**ALLOCATION RATIOS**

NAME OF COMMITTEE (In Full)  
Oregon Republican Party

**RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only:** Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER Chairman's Dinner  ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported <b>Transaction ID : H2-A-14</b>	FEDERAL %  <input style="width: 100px; text-align: center;" type="text" value="70.00"/> %	NONFEDERAL %  <input style="width: 100px; text-align: center;" type="text" value="30.00"/> %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL %  <input style="width: 100px; text-align: center;" type="text"/> %	NONFEDERAL %  <input style="width: 100px; text-align: center;" type="text"/> %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL %  <input style="width: 100px; text-align: center;" type="text"/> %	NONFEDERAL %  <input style="width: 100px; text-align: center;" type="text"/> %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL %  <input style="width: 100px; text-align: center;" type="text"/> %	NONFEDERAL %  <input style="width: 100px; text-align: center;" type="text"/> %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL %  <input style="width: 100px; text-align: center;" type="text"/> %	NONFEDERAL %  <input style="width: 100px; text-align: center;" type="text"/> %
ACTIVITY OR EVENT IDENTIFIER  ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL %  <input style="width: 100px; text-align: center;" type="text"/> %	NONFEDERAL %  <input style="width: 100px; text-align: center;" type="text"/> %

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

NAME OF COMMITTEE (In Full)  
 Oregon Republican Party

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
Oregon Republican Party (State)	MM / DD / YYYY 11 / 30 / 2011	25000

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	25000
<b>Transaction ID : H3A-40875-126354</b>	
<b>ii) Generic Voter Drive</b> .....	
<b>iii) Exempt Activities</b> .....	
<b>iv) Direct Fundraising (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Fundraising .....	
<b>v) Direct Candidate Support (List Activity or Event Identifier)</b>	
a) _____	
b) _____	
c) Total Amount Transferred For Direct Candidate Support.....	
<b>vi) Public Communications Referring Only to Party (Made by PAC)</b> .....	

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	25000.00
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	0.00
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred).....	25000.00

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial) <b>American Express</b>		Transaction ID : <b>H4-34825-129268-e</b>	Allocated Activity or Event: <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 <b>PO Box 297813</b>			Allocated Activity or Event Year-To-Date 196324.34	
City <b>Fort Lauderdale</b>	State <b>FL</b>	Zip Code <b>33329-7813</b>	Date <b>11 / 07 / 2011</b>	
Purpose of Disbursement: <b>Credit Card Fee</b>		Category/ Type	Date <b>11 / 07 / 2011</b>	
Activity or Event Identifier: <b>1020:ADMINISTRATION B 11 1</b>				
FEDERAL SHARE		+	NONFEDERAL SHARE	
0.46			1.17	
		=	TOTAL AMOUNT	
			1.63	

B. Full Name (Last, First, Middle Initial) <b>Authnet Gateway Billing</b>		Transaction ID : <b>H4-63267-129269-e</b>	Allocated Activity or Event: <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 <b>293 Boston Post Road W Suite 220</b>			Allocated Activity or Event Year-To-Date 196324.34	
City <b>Marlborough</b>	State <b>MA</b>	Zip Code <b>01752-4615</b>	Date <b>11 / 04 / 2011</b>	
Purpose of Disbursement: <b>Credit Card Fee</b>		Category/ Type	Date <b>11 / 04 / 2011</b>	
Activity or Event Identifier: <b>1020:ADMINISTRATION B 11 1</b>				
FEDERAL SHARE		+	NONFEDERAL SHARE	
2.8			7.2	
		=	TOTAL AMOUNT	
			10	

C. Full Name (Last, First, Middle Initial) <b>BD Janitorial</b>		Transaction ID : <b>H4-66787-129270-e</b>	Allocated Activity or Event: <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 <b>2902 E 2nd Street Unit 73</b>			Allocated Activity or Event Year-To-Date 196324.34	
City <b>Newberg</b>	State <b>OR</b>	Zip Code <b>97132-9610</b>	Date <b>11 / 16 / 2011</b>	
Purpose of Disbursement: <b>Janitorial</b>		Category/ Type	Date <b>11 / 16 / 2011</b>	
Activity or Event Identifier: <b>1020:ADMINISTRATION B 11 1</b>				
FEDERAL SHARE		+	NONFEDERAL SHARE	
22.4			57.6	
		=	TOTAL AMOUNT	
			80	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.66		65.97		91.63

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial) <b>Century Link</b>		Transaction ID : H4-54172-129271-e		Allocated Activity or Event: <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 91155				Allocated Activity or Event Year-To-Date 196324.34		
City Seattle	State WA	Zip Code 98111-9255		Date 11 / 04 / 2011		
Purpose of Disbursement: Telephone		Category/ Type				
Activity or Event Identifier: 1020:ADMINISTRATION B 11 1						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
150.15			386.11			536.26

B. Full Name (Last, First, Middle Initial) <b>Complete Campaigns</b>		Transaction ID : H4-35230-129278-e		Allocated Activity or Event: <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 3635 Ruffin Road Floor 3				Allocated Activity or Event Year-To-Date 196324.34		
City San Diego	State CA	Zip Code 92123-1880		Date 11 / 01 / 2011		
Purpose of Disbursement: Credit Card Fee		Category/ Type				
Activity or Event Identifier: 1020:ADMINISTRATION B 11 1						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
124.25			319.5			443.75

C. Full Name (Last, First, Middle Initial) <b>Complete Campaigns</b>		Transaction ID : H4-35230-129273-e		Allocated Activity or Event: <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 3635 Ruffin Road Floor 3				Allocated Activity or Event Year-To-Date 196324.34		
City San Diego	State CA	Zip Code 92123-1880		Date 11 / 04 / 2011		
Purpose of Disbursement: Credit Card Fee		Category/ Type				
Activity or Event Identifier: 1020:ADMINISTRATION B 11 1						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
1.75			4.5			6.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
276.15		710.11		986.26

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial) <b>Complete Campaigns</b>		Transaction ID : H4-35230-129274-e	Allocated Activity or Event: <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 3635 Ruffin Road Floor 3			Allocated Activity or Event Year-To-Date 196324.34	
City San Diego	State CA	Zip Code 92123-1880	Date 11 / 04 / 2011	
Purpose of Disbursement: Credit Card Fee		Category/ Type		
Activity or Event Identifier: 1020:ADMINISTRATION B 11 1				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
50.75			130.5	181.25

B. Full Name (Last, First, Middle Initial) <b>Complete Campaigns</b>		Transaction ID : H4-35230-129275-e	Allocated Activity or Event: <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 3635 Ruffin Road Floor 3			Allocated Activity or Event Year-To-Date 196324.34	
City San Diego	State CA	Zip Code 92123-1880	Date 11 / 08 / 2011	
Purpose of Disbursement: Credit Card Fee		Category/ Type		
Activity or Event Identifier: 1020:ADMINISTRATION B 11 1				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
14.35			36.9	51.25

C. Full Name (Last, First, Middle Initial) <b>Complete Campaigns</b>		Transaction ID : H4-35230-129276-e	Allocated Activity or Event: <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 3635 Ruffin Road Floor 3			Allocated Activity or Event Year-To-Date 196324.34	
City San Diego	State CA	Zip Code 92123-1880	Date 11 / 14 / 2011	
Purpose of Disbursement: Credit Card Fee		Category/ Type		
Activity or Event Identifier: 1020:ADMINISTRATION B 11 1				
FEDERAL SHARE		+	NONFEDERAL SHARE	= TOTAL AMOUNT
1.75			4.5	6.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.85		171.90		238.75

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Oregon Republican Party

Form A: Complete Campaigns. Transaction ID: H4-35230-129277-e. Allocated Activity or Event: Administrative. Date: 11/16/2011. Total Amount: 12.76.

Form B: CTS Holdings LLC. Transaction ID: H4-34230-129279-e. Allocated Activity or Event: Administrative. Date: 11/08/2011. Total Amount: 15.95.

Form C: Direct Mail Systems, Inc. Transaction ID: H4-38238-129280-e. Allocated Activity or Event: Administrative. Date: 11/16/2011. Total Amount: 500.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 148.04, 380.67, 528.71.

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial) <b>GE Capital</b>		Transaction ID : H4-62841-129282-e		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 31001-0273				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Pasadena State CA Zip Code 91110-0001				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Ricoh Copier Rental		Category/Type		Allocated Activity or Event Year-To-Date 196324.34	
Activity or Event Identifier: 1020:ADMINISTRATION B 11 1				Date 11 / 16 / 2011	
FEDERAL SHARE		+		NONFEDERAL SHARE	
57.68				148.31	
		=		TOTAL AMOUNT	
				205.99	

B. Full Name (Last, First, Middle Initial) <b>GE Capital</b>		Transaction ID : H4-62841-129283-e		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 31001-0273				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Pasadena State CA Zip Code 91110-0001				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Ricoh Copier Rental		Category/Type		Allocated Activity or Event Year-To-Date 196324.34	
Activity or Event Identifier: 1020:ADMINISTRATION B 11 1				Date 11 / 28 / 2011	
FEDERAL SHARE		+		NONFEDERAL SHARE	
47.88				123.11	
		=		TOTAL AMOUNT	
				170.99	

C. Full Name (Last, First, Middle Initial) <b>Green Office LLC</b>		Transaction ID : H4-65419-129284-e		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 11560 SW 67th Avenue Suite 333				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Portland State OR Zip Code 97223-8575				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Office Rent		Category/Type		Allocated Activity or Event Year-To-Date 196324.34	
Activity or Event Identifier: 1020:ADMINISTRATION B 11 1				Date 11 / 03 / 2011	
FEDERAL SHARE		+		NONFEDERAL SHARE	
630				1620	
		=		TOTAL AMOUNT	
				2250	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
735.56		1891.42		2626.98

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial) <b>Key Merchants</b>		Transaction ID : H4-62584-129288-e		Allocated Activity or Event: <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 7300 Chapman Highway				Allocated Activity or Event Year-To-Date 196324.34		
City Knoxville	State TN	Zip Code 37920-6612		Date 11 / 01 / 2011		
Purpose of Disbursement: Credit Card Fee		Category/ Type				
Activity or Event Identifier: 1020:ADMINISTRATION B 11 1						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
14			36			50

B. Full Name (Last, First, Middle Initial) <b>Key Merchants</b>		Transaction ID : H4-62584-129287-e		Allocated Activity or Event: <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 7300 Chapman Highway				Allocated Activity or Event Year-To-Date 196324.34		
City Knoxville	State TN	Zip Code 37920-6612		Date 11 / 02 / 2011		
Purpose of Disbursement: Credit Card Fees		Category/ Type				
Activity or Event Identifier: 1020:ADMINISTRATION B 11 1						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
22.51			57.88			80.39

C. Full Name (Last, First, Middle Initial) <b>Lake Oswego Building</b>		Transaction ID : H4-66876-129289-e		Allocated Activity or Event: <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 1440 SW Taylor Street				Allocated Activity or Event Year-To-Date 196324.34		
City Portland	State OR	Zip Code 97205-1990		Date 11 / 28 / 2011		
Purpose of Disbursement: Office Rent		Category/ Type				
Activity or Event Identifier: 1020:ADMINISTRATION B 11 1						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
336			864			1200

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
372.51		957.88		1330.39

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-64505-129298-e
The Leo Company
Mailing Address 9318 Champoeg Road NE
City Aurora State OR Zip Code 97002-8652
Purpose of Disbursement: Party Communication Services
Activity or Event Identifier: 1020:ADMINISTRATION B 11 1
Allocated Activity or Event: Administrative [checked] Fundraising [ ] Exempt [ ]
Voter Drive [ ] Direct Candidate Support [ ]
Public Comm (ref to party only) by PAC [ ]
Allocated Activity or Event Year-To-Date 196324.34
Date 11 / 19 / 2011
FEDERAL SHARE 700 + NONFEDERAL SHARE 1800 = TOTAL AMOUNT 2500

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-66607-129299-e
Third Century Solutions
Mailing Address 311 B Avenue Suite P
City Lake Oswego State OR Zip Code 97034-3071
Purpose of Disbursement: Party Communication Services
Activity or Event Identifier: 1020:ADMINISTRATION B 11 1
Allocated Activity or Event: Administrative [checked] Fundraising [ ] Exempt [ ]
Voter Drive [ ] Direct Candidate Support [ ]
Public Comm (ref to party only) by PAC [ ]
Allocated Activity or Event Year-To-Date 196324.34
Date 11 / 16 / 2011
FEDERAL SHARE 700 + NONFEDERAL SHARE 1800 = TOTAL AMOUNT 2500

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-65469-129300-e
U-Haul Storage
Mailing Address 11552 SW Pacific Highway
City Portland State OR Zip Code 97223-8667
Purpose of Disbursement: Storage Space Rental
Activity or Event Identifier: 1020:ADMINISTRATION B 11 1
Allocated Activity or Event: Administrative [checked] Fundraising [ ] Exempt [ ]
Voter Drive [ ] Direct Candidate Support [ ]
Public Comm (ref to party only) by PAC [ ]
Allocated Activity or Event Year-To-Date 196324.34
Date 11 / 01 / 2011
FEDERAL SHARE 20.99 + NONFEDERAL SHARE 53.96 = TOTAL AMOUNT 74.95

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1420.99, 3653.96, 5074.95

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

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [ ], [ ], [ ]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Oregon Republican Party

<b>A. Full Name (Last, First, Middle Initial) Transaction ID : H4-65469-129301-e</b> <b>U-Haul Storage</b> Mailing Address 11552 SW Pacific Highway		Allocated Activity or Event: <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
City State Zip Code Portland OR 97223-8667	Allocated Activity or Event Year-To-Date 196324.34	
Purpose of Disbursement: Storage Space Rental	<input type="checkbox"/> Category/ Type	Date <input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
Activity or Event Identifier: 1020:ADMINISTRATION B 11 1		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text" value="20.99"/> + <input type="text" value="53.96"/> = <input type="text" value="74.95"/>

<b>B. Full Name (Last, First, Middle Initial) Transaction ID : H4-66641-129304-e</b> <b>Winston Bookkeeping &amp; Payroll Services</b> Mailing Address 10119 SE 66th Avenue		Allocated Activity or Event: <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
City State Zip Code Milwaukie OR 97222-2514	Allocated Activity or Event Year-To-Date 196324.34	
Purpose of Disbursement: Bookkeeping	<input type="checkbox"/> Category/ Type	Date <input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2011"/>
Activity or Event Identifier: 1020:ADMINISTRATION B 11 1		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text" value="422.1"/> + <input type="text" value="1085.4"/> = <input type="text" value="1507.5"/>

<b>C. Full Name (Last, First, Middle Initial) Transaction ID : H4-29598-129267-e</b> <b>Allen Alley</b> Mailing Address 1003 Terrace Drive		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" 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
City State Zip Code Lake Oswego OR 97034-4698	Allocated Activity or Event Year-To-Date 4239	
Purpose of Disbursement: Reimburse Rent	<input type="checkbox"/> Category/ Type	Date <input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
Activity or Event Identifier: Chairman's Dinner		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT <input type="text" value="1575"/> + <input type="text" value="675"/> = <input type="text" value="2250"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="2018.09"/>		<input type="text" value="1814.36"/>		<input type="text" value="3832.45"/>

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>



**SCHEDULE L (FEC Form 3X)**

**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID : Levin-1

NAME OF COMMITTEE (In Full) Oregon Republican Party		
NAME OF ACCOUNT Levin		
	<b>COLUMN A TOTAL THIS PERIOD</b>	<b>COLUMN B YEAR-TO-DATE</b>
1. RECEIPTS FROM PERSONS		
(a) Itemized ..... (Use Schedule L-A)	0	0
(b) Unitemized .....	0	0
(c) Total .....	0	0
2. OTHER RECEIPTS .....	0	0
3. TOTAL RECEIPTS ..... (Add Lines 1c and 2)	0	0
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
(a) Voter Registration .....	0	0
(b) Voter ID .....	0	0
(c) GOTV .....	0	0
(d) Generic Campaign .....	0	0
(e) Total .....	0	0
5. OTHER DISBURSEMENTS .....	0	0
6. TOTAL DISBURSEMENTS ..... (Add Lines 4e and 5)	0	0
7. BEGINNING CASH ON HAND ..... (for Column B, use cash as of January 1st)	66	66
8. RECEIPTS ..... (from Line 3)	0	0
9. SUBTOTAL ..... (Add Lines 7 and 8)	66	66
10. DISBURSEMENTS ..... (From Line 6)	0	0
11. ENDING CASH ON HAND ..... (Subtract Line 10 From Line 9)	66	66