

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.

Holding Onto Oregon's Priorities

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)

- 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)
 - Mar 20 (M3)
 - Apr 20 (M4)
 - May 20 (M5)
 - Jun 20 (M6)
 - Jul 20 (M7)
 - Aug 20 (M8)
 - Sep 20 (M9)
 - Oct 20 (M10)
 - Nov 20 (M11) (Non-Election Year Only)
 - Dec 20 (M12) (Non-Election Year Only)
 - Jan 31 (YE)

(c) 12-Day Primary (12P) General (12G) Runoff (12R)

PRE-Election Report for the: Convention (12C) Special (12S)

Election on / / in the State of

(d) 30-Day General (30G) Runoff (30R) Special (30S)

POST-Election Report for the: / / 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 F. Stephen Michels

Signature of Treasurer F. Stephen Michels [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

Holding Onto Oregon's Priorities

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="2014"/>		102174.21
(b) Cash on Hand at Beginning of Reporting Period.....	112998.35	
(c) Total Receipts (from Line 19)	54500.00	636431.70
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	167498.35	738605.91
7. Total Disbursements (from Line 31).....	45348.33	616455.89
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	122150.02	122150.02
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

Holding Onto Oregon's Priorities

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

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).....	2500.00	41952.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2500.00	41952.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	20500.00	468501.70
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	23000.00	510453.70
12. Transfers From Affiliated/Other Party Committees.....	31500.00	125330.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	648.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	54500.00	636431.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	54500.00	636431.70

DETAILED SUMMARY PAGE

of Disbursements

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	10348.33	134555.89
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	10348.33	134555.89
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	320000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	16000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	16000.00
29. Other Disbursements	25000.00	145900.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	45348.33	616455.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	45348.33	616455.89

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)	23000.00	510453.70
34. Total Contribution Refunds (from Line 28(d))	0.00	16000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23000.00	494453.70
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10348.33	134555.89
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	648.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10348.33	133907.89

**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 19
	<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)
Holding Onto Oregon's Priorities

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

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2014

Transaction ID : SA11AI.7960

Amount of Each Receipt this Period
2500.00

Total earmarked through conduit; PAC limit not affected

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. James Bryant Hall

Mailing Address 4606 Fessenden Street NW

City State Zip Code
Washington DC 20016

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

Name of Employer Occupation
Tiber Creek Health Strategies President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2014

Transaction ID : SA11AI.7961

Amount of Each Receipt this Period
2500.00

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	2500.00

**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 7 OF 19
<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

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NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)
A. GENERAL MOTORS COMPANY POLITICAL ACTION COMMITTEE (GM PAC)

Mailing Address 25 MASSACHUSETTS AVENUE, NW
SUITE 400

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00076810

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 23 / 2014
Transaction ID : SA11C.7964

Amount of Each Receipt this Period: 4000.00

Full Name (Last, First, Middle Initial)
B. JPMORGAN CHASE & CO. PAC

Mailing Address 601 PENNSYLVANIA AVENUE, NW
7TH FLOOR

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00128512

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 11 / 26 / 2014
Transaction ID : SA11C.7956

Amount of Each Receipt this Period: 4000.00

Full Name (Last, First, Middle Initial)
C. NEXTERA ENERGY, INC. POLITICAL ACTION COMMITTEE

Mailing Address 700 UNIVERSE BLVD.

City JUNO BEACH State FL Zip Code 33408

FEC ID number of contributing federal political committee. **C** C00064774

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 12 / 17 / 2014
Transaction ID : SA11C.7958

Amount of Each Receipt this Period: 2500.00

SUBTOTAL of Receipts This Page (optional).....▶ 10500.00

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 8 OF 19
<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

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NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)
A. UNITED HEALTH SERVICES PAC, INC.

Mailing Address 211 East Doyle Street

City Toccoa State GA Zip Code 30577

FEC ID number of contributing federal political committee. **C** C00400135

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA11C.7965

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. VERIZON WIRELESS/VERIZON COMM INC PAC

Mailing Address 'VERIZON WIRELESS PAC'
180 WASHINGTON VALLEY ROAD

City BEDMINSTER State NJ Zip Code 07921

FEC ID number of contributing federal political committee. **C** C00363127

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 17 / 2014
Transaction ID : SA11C.7957

Amount of Each Receipt this Period
5000.00

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
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	20500.00

**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 19
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

A. WYDEN FOR OREGON
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 3271
 City PORTLAND State OR Zip Code 97208
 FEC ID number of contributing federal political committee. **C** C00436998
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 125330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : SA12.7966
 Amount of Each Receipt this Period
 31500.00
 Joint Fundraising Transfer

B. Gary Fish
 Full Name (Last, First, Middle Initial)
 Mailing Address 61415 Tam Mc Arthur Loop
 City Bend State OR Zip Code 97702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Deschutes Brweery CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2014
Transaction ID : SA12.7966.0
 Amount of Each Receipt this Period
 4800.00
[MEMO ITEM]

C. William Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 2334 NW Tower Rock Drive
 City Bend State OR Zip Code 97701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 William Smith Properties Real Estate Developer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2014
Transaction ID : SA12.7966.1
 Amount of Each Receipt this Period
 4800.00
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	31500.00
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 10 OF 19
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

A. Patricia Smith
Full Name (Last, First, Middle Initial)

Mailing Address 2334 NW Tower Rock Drive

City Bend State OR Zip Code 97701

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

Name of Employer La Pine School District Occupation Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 12 / 18 / 2014
Transaction ID : SA12.7966.2

Amount of Each Receipt this Period 4800.00

[MEMO ITEM]

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

Mailing Address One Centerpointe Dr. Suite 200

City Lake Oswego State OR Zip Code 97035

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

Name of Employer Greenbrier Cos. Occupation CEO/President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 10 / 2014
Transaction ID : SA12.7966.3

Amount of Each Receipt this Period 5000.00

[MEMO ITEM]

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

Mailing Address 4318 SW Fairview Circus

City Portland State OR Zip Code 97221

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

Name of Employer None Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 12 / 10 / 2014
Transaction ID : SA12.7966.4

Amount of Each Receipt this Period 4800.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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 11 OF 19
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial) A. Mr. Joseph Angel		Date of Receipt M M / D D / Y Y Y Y 12 / 22 / 2014 Transaction ID : SA12.7966.5
Mailing Address 1507 NW 24th Avenue		Amount of Each Receipt this Period 5000.00
City Portland	State OR	Zip Code 97210
FEC ID number of contributing federal political committee. C		[MEMO ITEM]
Name of Employer Pacific Star	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Dale Sause		Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2014 Transaction ID : SA12.7966.6
Mailing Address 155 E. Market Avenue		Amount of Each Receipt this Period 4800.00
City Coos Bay	State OR	Zip Code 97420
FEC ID number of contributing federal political committee. C		[MEMO ITEM]
Name of Employer Sause Brothers	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4800.00	

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

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	31500.00

**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 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

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NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement Fees

003

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 21 / 2014

Transaction ID : SB21B.7963

Amount of Each Disbursement this Period

98.75

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 4099 SE International Way Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement Payroll Fees

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 28 / 2014

Transaction ID : SB21B.7967

Amount of Each Disbursement this Period

19.60

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 4099 SE International Way Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement Payroll Taxes

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 28 / 2014

Transaction ID : SB21B.7968

Amount of Each Disbursement this Period

291.97

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

410.32

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Processing

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.7969

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Taxes

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.7978

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukie State OR Zip Code 97222

Purpose of Disbursement
Payroll Fees

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.7979

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 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

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NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 4099 SE International Way
Suite 203

City Milwaukee State OR Zip Code 97222

Purpose of Disbursement
Payroll Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : SB21B.7983

Amount of Each Disbursement this Period

0.13

Full Name (Last, First, Middle Initial)

B. AT&T Mobility

Mailing Address PO Box 536216

City Atlanta State GA Zip Code 30353-6216

Purpose of Disbursement
Telephone Service

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014

Transaction ID : SB21B.7973

Amount of Each Disbursement this Period

94.41

Full Name (Last, First, Middle Initial)

C. Bank of America

Mailing Address PO Box 53132

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Payment

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : SB21B.7976

Amount of Each Disbursement this Period

1064.00

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

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

1158.54

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

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NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address PO Box 53132

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Bank Fees

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B.7976.0

Amount of Each Disbursement this Period

39.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Washington County Democrats

Mailing Address PO Box 23243

City Tigard State OR Zip Code 97281

Purpose of Disbursement
Event Tickets

012
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2014

Transaction ID : SB21B.7976.1

Amount of Each Disbursement this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Tim Leahy

Mailing Address 5136 NE Prescott

City Portland State OR Zip Code 97218

Purpose of Disbursement
Salary

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B.7981

Amount of Each Disbursement this Period

1225.87

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

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

1225.87

**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

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NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. The Ashmead Group

Mailing Address 909 New Jersey Avenue SE
Suite 1018

City Washington State DC Zip Code 20003

Purpose of Disbursement
Fundraising Consultant

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2014

Transaction ID : SB21B.7971

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Jocelyn Tyree

Mailing Address 8935 SW Bellflower Street

City Tigard State OR Zip Code 97224

Purpose of Disbursement
Salary

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 28 / 2014

Transaction ID : SB21B.7970

Amount of Each Disbursement this Period

807.19

Full Name (Last, First, Middle Initial)

C. Jocelyn Tyree

Mailing Address 8935 SW Bellflower Street

City Tigard State OR Zip Code 97224

Purpose of Disbursement
Salary

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2014

Transaction ID : SB21B.7980

Amount of Each Disbursement this Period

807.19

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

6614.38

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 815 NW Hoyt

City Portland State OR Zip Code 97208

Purpose of Disbursement
Box Rental

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.7972

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

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NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN

Mailing Address PO BOX 3662

City SEATTLE State WA Zip Code 98124

Purpose of Disbursement

011

Category/
Type

Candidate Name

PATTY MURRAY

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WA District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			21			2014			

Transaction ID : SB23.7977

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

B. PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN

Mailing Address PO BOX 3662

City SEATTLE State WA Zip Code 98124

Purpose of Disbursement

011

Category/
Type

Candidate Name

PATTY MURRAY

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WA District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			21			2014			

Transaction ID : SB23.7986

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

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

1	0	0	0	0	0	0	0	0	0
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1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Holding Onto Oregon's Priorities

Full Name (Last, First, Middle Initial)

A. Democratic Party of Oregon

Mailing Address 232 NE 9th Ave.
Suite 105

City Portland State OR Zip Code 97232

Purpose of Disbursement
Non-Federal Contribution

Category/
Type

Candidate Name

Democratic Party of Oregon

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB29.8004

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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